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ABSTRACT

The report discusses the participation of elderly American Indians in Federal entitlement programs and describes the Reservation Access Project, which was funded to increase by 100% the number of Indian elderly served and to develop a model for delivery services. The first section provides an introduction, organizational history of the National Indian Council on Aging, an overview of the elderly Indian and background information on the Access Project. The second section describes the Access Project, its purpose, program variables, program implementation, and method used in selecting the four project sites. The four reservations (Jicarilla, Pine Ridge, Papago, and Siletz) are described in terms of their history, culture, government, tribal economy, climate, transportation, community facilities, population, and socioeconomic characteristics. Findings indicate: Access identified 1,386 Indian elderly age 55+ during the 12-month project (1980-81); a significant level of involvement of elders in some programs and a need for improvement in others; and in the development of the model, some long held beliefs were proven erroneous, while others surfaced which ran counter to popularly-held ideas with the Indian community. Eight recommendations provide suggestions which deal with the enhancement of services to Indian elderly. Appendices include the site selection rating scale, a contract form, and 22 statistical tables. (AH)

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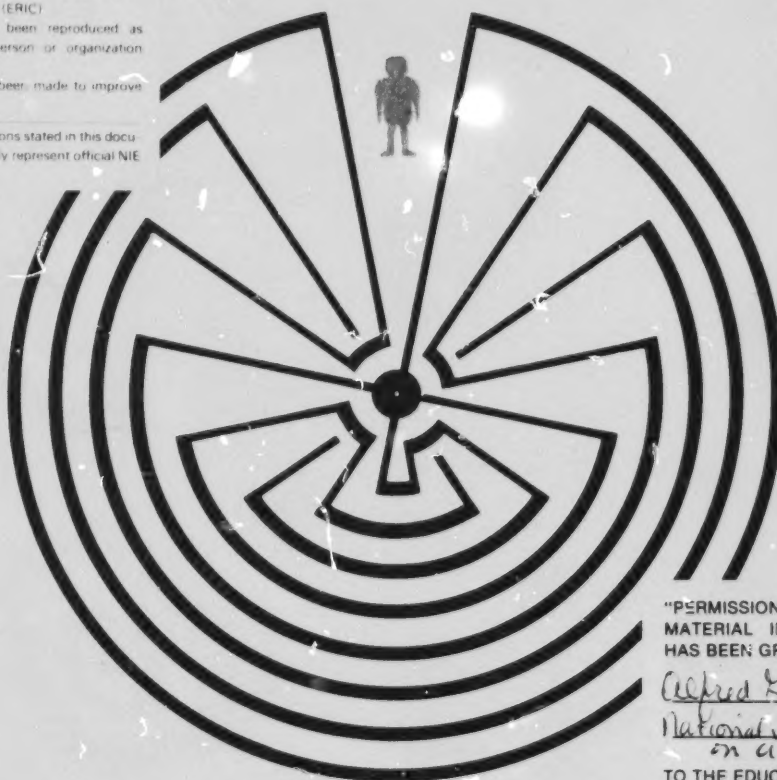
INDIAN ELDERLY and ENTITLEMENT PROGRAMS:

An Accessing Demonstration Project

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SECTION I:
BACKGROUND

I. INTRODUCTION

The National Indian Council on Aging is a national organization dealing specifically with the needs and concerns of the American Indian and Alaskan Native elderly.

The establishment of the Council in 1976 was a result of the long struggle by the Indian community for recognition of the unique circumstances faced by the Indian* elderly.

In addition to these factors, a unique concern of Indian people has been the right to Indian self-determination; i.e. the right of Indian tribes, affirmed and reaffirmed by the Federal government through treaties, Executive Orders and legislation, to administer programs designed to serve the Indian community from a basis in tribal sovereignty and tradition.

As a result of repeated unsuccessful attempts in the early 1970's by representatives of the national Indian community to promote action on the unmet needs and special concerns of the Indian elderly, the National Tribal Chairmen's Association sponsored the first National Indian Conference on Aging in June of 1976 with funding from the Administration on Aging. At this conference, the 1,500+ Indian participants elected a National Indian Task Force on Aging, later incorporated as the National Indian Council on Aging, to serve as a national advocate on behalf of the Indian elderly, and to follow up on remedial action recommended as a result of the definition of unmet needs and problems of the Indian elderly at the conference, including recommendations from an Indian Concerns Session at the 1971 White House Conference on Aging which had never been acted upon. The Indian delegates at that conference outlined five general areas where it was felt immediate action must be taken:

1. The United States must reassure our elderly citizens that the policy concerning termination is no longer a national policy.
2. That an adequately staffed and funded Indian desk similar to Indian desks in other Federal agencies be established in the Administration on Aging or its successor. This office would act as a central point for information and an advocate for the needs of the Indian elderly.

*The term "Indian" includes reference to Alaskan Natives.

3. That sections 303 Part (a) and section 612 of the Older Americans Act of 1965, as amended November 1970, be revised so that Indian tribes no longer have to go through State agencies for funding. This is necessary because of the lack of sympathy by most States for their Indian population. All funds for older Indian programs should be funded directly to Indian tribes.
4. That agencies serving elderly Indians increase funding levels to Indian tribes so as to adequately serve their needs.
5. That a thorough and complete research program be developed to search, evaluate, and cause to be amended, existing laws and policies governing programs serving the elderly Indian.

In the area of Income, the Indian delegates identified the following issue and made the following recommendations:

ISSUE: The elderly Indian citizen should have an income which would permit him to live the rest of his life in health, decency, and dignity.

RECOMMENDATIONS

1. Because of the past relationships between the Federal government, through the Bureau of Indian Affairs, and the Indians, most of our people did not participate in retirement programs such as: company retirement plans, insurance plans, investing in income property and, in many cases, Social Security. Therefore, the sole source of income for many of the elderly is welfare and for those fortunate enough to reach 72, Social Security at the very minimum level. The elderly Indians must be permitted to work and earn income for as long as they want or are able. They should not be required to forfeit part of other benefits when continuing to earn.
2. That the elderly and middle-aged Indian should be assisted in obtaining job information, training, counseling, placement, and other assistance which would permit him to continue employment. These steps would enable him to qualify for an increased benefit when he becomes eligible to receive Social Security.
3. That there be an equitable form of tax relief for the elderly Indian.

4. That retirement plans be worked out in such a way that there is a guaranteed pension, that it be vested and with portability.
5. That there be a Social Security "ALERT" to assure that all eligibles receive their entitlements.
6. That a Federal policy be established which would state that judgment funds are not to be considered as assets or windfall, but rather the due allotment and recompense for misappropriated lands and rights. That this policy be binding to all State and local welfare agencies.
7. That State public assistance departments cease to press the elderly Indian to sell individual allotted lands on reservations to meet their own subsistence needs, in view of the Indians' desire to retain the tribal homeland intact for further use in accord with President Nixon's rejection of termination as a Federal policy.
8. That Social Security benefits be extended to all male and female elderly upon reaching the age of eligibility regardless of their participation during previous periods of employment.
9. That separate funds be made available for the establishment of special manpower programs designed by and for elderly Indians.
10. That manpower programs be designed to retain the people on or near the homelands of the elderly Indian.
11. That these manpower programs be adequately funded to meet the employment needs of the Indian aged.

ORGANIZATIONAL HISTORY

In September 1976, the Administration on Aging awarded the National Indian Council on Aging a three-year Model Project grant (Grant No. 90-A-989). The Model Project ran from September 29, 1976 to October 31, 1979.

Currently, NICOA is operating in its second year of funding under a cooperative agreement with the Administration on Aging under Grant No. 90-AM-2192, running from November 1, 1980 to October 31, 1981.

National headquarters were established in Albuquerque, New Mexico, in the heart of the southwest Indian country, so that it might be more easily accessible to the large numbers of Indian elderly in that part of the coun-

try. Location in Albuquerque has had the additional advantages of proximity to Bureau of Indian Affairs (BIA) and Indian Health Service (IHS) area offices, as well as the University of New Mexico and its American Indian Law Center and gerontology program.

The full membership of the National Indian Council on Aging currently consists of 39 Indian and Alaskan Native individuals, of whom twelve constitute the Board of Directors, which spans the 12 Bureau of Indian Affairs' geographical areas.

The overall purpose of the National Indian Council on Aging is to provide advocacy for the Indian and Alaskan Native elderly. As its specific objective, the Council has set itself the task to bring about the remedial action recommended at the National Indian Conference on Aging.

The National Indian Council on Aging has pursued four basic avenues to accomplish its objectives:

1. Encouragement of legislative amendments where required to bring about the remedial action recommended;
2. Communication and cooperation with service provider agencies which can make the necessary changes within the scope of their current and administrative guidelines;
3. Dissemination of information to the Indian community on available supportive resources and, where necessary,
4. Intercession with the appropriate agencies to provide access to these resources.

Since its inception, the Council has established and maintained cooperative relationships with a number of Federal agencies. In addition to the Administration on Aging, the National Aging Network and all Federal agencies administering services to the aging, the Council works closely with the Indian Health Service and the Bureau of Indian Affairs. The latter is providing substantial in-kind contributions of office space, equipment, and telephone service to the Council at its Albuquerque headquarters.

NICOA has also established a relatively strong communication network with Indian tribes across the country, and has cooperated with and lent expertise to numerous Indian organizations, Congressional staff and committees, colleges and universities.

Among the Council's numerous activities on behalf of the Indian elderly, several are:

Training. During the past two years, NICOA's Office of Training and Technical Assistance (OTTA) began implementation of a systematic effort to provide training to tribal aging program administrators. This effort was instituted in recognition of the tremendous need for such training opportunities, evident since NICOA's inception and made more pressing by the passage of Title VI of the Older Americans Act.

Accordingly, OTTA met with a number of tribal aging program directors to determine their most critical training needs and effective approaches to meet those needs. Based on this input the OTTA organized a week-long training session composed of eight workshops in a variety of topic areas, with resource persons drawn from both Indian and non-Indian aging programs, AoA regional and central offices, and representatives of other federal agencies. This training session, held in November 1979, attracted over 80 administrators of tribal aging programs around the country. This training was the first of its kind in the nation and constitutes the first national training effort for this constituency offered by any organization. A manual based on this training session was prepared by OTTA and is available to Indian tribes, members of the National Aging Network, cooperating agencies, and the academic community to the extent of available supplies.

The manual is a basic guide to the development and implementation of aging programs in the Indian community. It covers such topics as:

1. An overview of the aging field in general
2. Specific programs, e.g. nutrition, transportation, homemaker-home health care, multipurpose senior centers
3. Program administration
4. Basic grantsmanship
5. Advocacy.

Technical Assistance. In addition to the training efforts described above, NICOA has continually expanded its provision of technical assistance in response to ever-increasing requests from tribes and Indian organizations, Federal agencies, Congressional committees and staff members, and members of the National Aging Network, including the National As-

sociation of State Units on Aging and the National Association of Area Agencies on Aging. OTTA was consulted at various points in the planning process for the 1981 White House Conference on Aging. The Office has responded to numerous requests by national aging organizations for presentations at national conferences, and a number of national organizations, such as the National Health Screening Council and the National Council for Homemaker-Home Health Aide Services, asked for and received assistance in tailoring services and information materials to the needs of Indian tribes.

NICOA has also been consulted by a growing number of universities and colleges in regard to the development of curricula, workshops and symposia in the field of aging. NICOA has also provided direct assistance to post-secondary institutions in efforts to recruit Indian students at the secondary level. (It is worthy of note that the training of a cadre of qualified Indian professionals in the field of aging has been severely reduced by the defunding of the Native American Gerontology program of the Rocky Mountain Gerontology Center at the University of Utah, the only such training program in the country. The need for such programs is acute, as evidenced by the fact that an NICOA staff member is one of only three professionally-trained Indian gerontologists in the country.)

Finally, NICOA has continued to provide technical assistance to Indian tribes and organizations on an individual basis nationwide. Such requests range from identification of funding sources to interpretation of regulations to planning new tribal aging programs. NICOA's technical assistance has also been solicited for the establishment of statewide Indian councils on aging in several states. Perhaps most notably NICOA was requested to lend its expertise in negotiations leading to designation of the Navajo Nation as the first interstate planning and service area (PSA) in the country.

Finally, NICOA augments these technical assistance efforts by publishing its quarterly and monthly newsletters, and mailing supplementary updates on legislative developments to all tribes and numerous organizations and concerned individuals.

Research. Over the course of the past two years, NICOA has designed and carried out the first nationwide needs assessment of the Indian elderly. This research was funded by the Administration on Aging (Grant No. 90-A-1369) in the amount of \$207,607 in the first project year and \$169,609 in the second project year. The research project was undertaken to remedy the virtual absence of accurate data on this segment of the population.

Such data will be crucial to adequately justify, plan and evaluate programs for elderly Indians.

Data was collected from approximately 800 randomly selected Indians aged 45+ residing on reservations, in urban areas, off-reservation rural areas, and Alaskan Native villages, using a slightly modified version of Duke University's OARS (Older Americans Resources and Services) instrument, supplemented with a questionnaire on housing and transportation.

In conjunction with the survey effort, NICOA also contacted State Offices on Aging and other public and private service provider agencies to determine what services are theoretically now available to the Indian elderly, and which are being utilized by them.

The research findings have been published in report form. The report is available to the aging network, tribes, and the academic community, and provides the strongest information base to date on the social, economic, physical and mental well-being of the Indian elderly, including a detailed look at services they are now receiving, as well as unmet needs. In addition, by using the OARS instrument, which has previously been administered to elderly populations in a number of U.S. cities and states, NICOA has ensured that its data will be comparable to existing data on the U.S. elderly population in general.

Analysis of the research data is expected to generate a number of more narrowly-focused researchable questions, as well as significant policy recommendations regarding ways to eliminate barriers to services for elderly Indians.

Title VI. Proceeding on the basis of its mandate from the first National Indian Conference on Aging, NICOA's foremost priority at the time of its inception was the inclusion of Indian concerns in the 1978 amendments to the Older Americans Act. Accordingly, one of the first efforts undertaken by the National Indian Council on Aging was the drafting of an amendment to the Act authorizing a provision for direct funding to Indian tribes and organizations. This draft formed the basis for the legislation that ultimately became Title VI, "Grants for Indian Tribes".

Members and staff of NICOA were called upon to provide expert testimony on the 1978 amendments and worked closely with members and staff of Congressional committees in developing language reflecting the special needs of the Indian elderly for inclusion in proposed amendments. While Congress was considering the FY 80 funding level for Title VI, NICOA again was frequently called upon by Congressional commit-

tees and staff for expertise. NICOA staff also worked closely with Administration on Aging staff throughout the development of regulations for Title VI. Periodically, NICOA mailed out information on this legislation to NICOA members, Indian tribes and organizations nationwide. NICOA staff also made numerous presentations on this subject to Indian organizations around the country during 1979. In addition, NICOA has responded to literally hundreds of telephone calls from tribes wanting further details on this topic alone.

THE ELDERLY INDIAN

The Indian/Alaskan Native population is small, but diverse. According to the 1980 Census, the population is estimated at about 1.4 million, with 109,000 over 60 years of age. About 400 different tribes exist in the U.S. today, speaking over 250 distinct languages. Currently, there are close to 600 reservations, rancherias, and Alaskan Native villages, each with its own government. These reservations range in size from less than one acre to 14 million acres. Roughly half the Indian elderly population live on reservations, with the remainder in urban or non-reservation rural areas. (Estimate: reservation 52%; urban 48%.)

The economic status of the Indian elderly is even less secure than that of most older Americans. In 1970, the median income level for elderly Indian men was \$1,554 — significantly below the poverty level. For women, the figure was even lower — \$1,162. The 1980 Census data is not expected to change this picture significantly.

In 1970, the median income level for Indians on reservations was approximately \$1,500 per year. Unemployment on reservations averages 37%. (On some reservations, that rate goes as high as 95%!)

According to the 1970 Census, over 50% of the nation's Indian elderly had incomes below the poverty level, yet they receive far less than they are proportionately entitled to from the various income entitlement programs. For example, the 1970 Census showed that only 45% of Indians over 50 received Social Security benefits — a lower rate than among the Anglo, Black, or Hispanic elderly. Another factor contributing to the low Indian participation in these programs could be the lower life expectancy of Indian people compared to their non-Indian cohorts. In 1980, the estimate increased to 65 years, but in comparison the non-Indian life expectancy in 1980 climbed to 73.3. This means that the average Indian person barely lives long enough to reach the age of eligibility for most entitlement programs. Those who do are not likely to collect benefits for as many years as their non-Indian counterparts.

NICOA has, through its conferences, identified several factors that keep Indian elders from receiving the income supports they are entitled to under existing programs. As a result of the complexity of rules and regulations governing Federal entitlement programs such as Social Security or Veterans Administration programs, many Indian elderly never apply for benefits, or fail to complete the application process. Some of the regulations create hardships for Indian elders — for example, tribal dividends must be counted as income when SSI eligibility is determined. The Social Security program requires documentation of quarters worked, of marriage, and of age — all of which serve as barriers to utilization of programs.

Another problem identified by NICOA is the lack of outreach and programmatic information being made available to the Indian community. This is compounded by the under-representation (usually absence) of Indians as staff members of these various agencies. In addition, the process of enrolling in entitlement programs is much too complicated and lengthy, and there is rarely sufficient assistance for the Indian elder to negotiate the "system".

Housing and transportation are two of the most serious problems facing Indian elders, whether urban or rural. Overall, Indian housing is of poorer quality and is more crowded than dwellings of the general population. A national needs assessment of the Indian elderly completed by NICOA in 1980 showed that the housing stock of Indian elders is generally old and dilapidated, with 26% of the housing constructed prior to 1939. Twenty-five percent of the elders surveyed reported bedrooms occupied by three or more persons, and this indication of overcrowded conditions is supported by U.S. Census data showing three times as many Indian residences housing seven or more persons as in the general population. In 1979-1980, the elderly reported service outages of heat, water, and toilet systems at rates of 20%, 24% and 15% respectively; 44% of all Alaskan respondents reported they suffered a heat outage during the preceding winter. The 1970 Census showed that 26.3% of Indian housing units had no plumbing, compared to 5.5% in the general population. Only 50% of rural Indian homes had complete bathrooms in 1970, and a third lacked piped water. Since the elderly tend to live in the most traditional homes, they likely account for a large percentage of this housing. In addition, the sanitation problems caused by lack of running water and plumbing facilities contribute to the high rates of diseases such as tuberculosis among the Indian population. Large numbers of Indian dwellings, especially on reservations, also lack electricity and telephone service.

Transportation is one of the services most frequently requested by Indian elders and is probably the top priority for all Indian aging programs, since most Indian elders are not in a position to own or drive an automobile. Urban elders often find available public transportation frightening and difficult to comprehend. Urban service providers report that extremely few elders make use of existing public transportation.

The elders left on remote areas of the reservation find it extremely difficult to obtain even the essentials of life such as food, clothing, wood and water.

Weatherization of homes, fuel assistance, and increased funding for reservation transportation services are sorely needed.

Some services are available for elders on most reservations, including Older Americans Act nutrition programs, Indian Health Service programs, and HUD programs. Despite the existence of these services, however, the extent to which needs are met is inadequate. Factors for this inadequacy include transportation problems, lack of service coordination, lack of outreach, and failure of State and Federal programs to respond to Indian cultural norms.

Health. Life expectancy is approximately 10 years behind the rest of the population (65 years vs. 73 years in 1980).

A variety of recent studies has shown that if minority elders live to age 60, chances are they will outlive their counterparts — and will survive in better condition. This generalization seems to be true of the Indian elderly as well. For example, a study by the Association of American Indian Physicians in 1978 found that of the total number of outpatient visits made by Indians over age 45, 65% were made by those between 45 and 64. The rate decreases for those aged 64 to 74, then picks up again after age 75. This may imply that those who manage to survive past age 65 are actually healthier, as a group, than the "young old".

The Indian Health Service (IHS) provides comprehensive health services to Indians living on or adjacent to Federal Indian reservations and Alaskan Native villages.

It is a common misconception that all Indians receive free health care from IHS. But nearly all urban Indians — about half the total Indian population — are not served by IHS. Consequently, very few elderly Indians in urban areas seek out health care. Preventive care and dental treatment are rarely sought. Most elderly urban Indians receive emergency health care only. When urban Indians do seek out health services, it is not uncommon for them to be refused service from public agencies because of the misconception that IHS and CIA will take care of them.

For rural and reservation elders who are served by IHS, other problems arise in spite of IHS's significant efforts and contributions. Lack of transportation is mentioned frequently as one of the most serious barriers to health care for reservation elders.

There are currently six nursing homes on Indian reservations. In general, these nursing homes are understaffed, over-crowded, and financially insecure. If Shannas and Tobin's study of 1975 can be used as guide, about 4,150 older Indians are in long-term care institutions currently. Obviously, the great majority of these are in off-reservation nursing homes. The removal of these reservation elders from their families, their native languages, foods, and customs is often a severe shock, leading to withdrawal and depression, even death. The need for nursing homes is a problem that cannot be overlooked.

There is a need to prevent premature institutionalization by providing in-home and supportive services. Such programs are and will continue to be vital components in the total "continuum of care."

PROJECT BACKGROUND

In August, 1977, the National Indian Council on Aging opened its Liaison Specialist Office in Washington, D.C. The office's primary responsibility was to monitor the progress of the Title VI legislation and to provide primary information to appropriate members of Congress regarding this social service legislation. Its secondary function was to begin to follow up on the recommendations of the conferees to the 1976 National Indian Conference on Aging. One of the areas that was identified as a major problem facing the Indian elders was the lack of an adequate income. The primary "income" programs are those related to the Social Security Administration programs. In talks between the Social Security Administration and the National Indian Council on Aging during August 1977 through August 1978, it became apparent that a concrete initiative needed to be implemented that would ultimately result in an increase in the numbers of Indian elderly in these entitlement programs. These meet-

ings resulted in NICOA making presentations before the HEW Intra-departmental Council on Indian Affairs. These presentations identified the needs of the nation's Indian elders and the recommendations of the 1976 National Indian Conference on Aging.

The Commissioner of the Administration for Native Americans, Mr. David Lester, became increasingly concerned that older Indians were not benefitting from these programs to which they were entitled by their status as elderly and as Indians. In the spring of 1979, the Administration for Native Americans and the National Indian Council on Aging developed plans for the implementation of a "model development" project that would identify the participation rates of older Indians in the various entitlement programs and to assist them into these service delivery systems. On September 28, 1979, the Administration for Native Americans awarded the National Indian Council on Aging an \$85,000 grant to implement this project in FY 1980 — the first year of the National Indian Council on Aging's cooperative agreement relationship with the Administration on Aging. It was agreed between the three entities that this grant would be added to the AoA/NICOA cooperative agreement funding level of \$336,000. On November 1, 1980, the project was implemented by the National Indian Council on Aging.

SECTION II:

METHODOLOGY

II. THE PROJECT

PURPOSE

It was the goal of the ANA Access Project to increase by 100 percent the number of elderly Indians on selected reservations receiving services and benefits to which they are entitled. This increase was to be achieved through a two-stage process:

1. Data Collection: obtaining data through surveys to identify the elderly; to determine the types of services being received; and the characteristics of the elderly
2. Referrals: to assist these elderly to access the service delivery system by transporting them; through advocacy; and through referrals to third party service providers.

It has been NICOA's experience that many elderly Indians do not receive services and benefits to which they are entitled. Reasons for their non-participation have been largely undocumented and this effort represents the first attempt at documentation. However, at the First and Second National Indian Conferences on Aging, the elderly attending these conferences identified the lack of income as one of the problems most seriously affecting their lives. Through inferences and extrapolation from other minority group experiences, NICOA feels that lack of information regarding service eligibility and benefits has precluded many otherwise eligible elderly Indians from participating in the various entitlement programs. In addition, the outreach efforts of these respective agencies must be reviewed for relevance and appropriateness.

PROGRAM VARIABLES

To accomplish the goals set for this project in light of the issues mentioned in the preceding paragraph, the following were preliminary steps in the implementation of the project:

1. Four sites (reservations) would be identified;
2. The sites would be selected on the basis of the following criteria:
 - a. geographic spread
 - b. high incidence of limited English speaking elderly or monolinguals

c. isolation

d. number of elderly (60 and over) must be at least 50

expressed interest in participation by the tribes and commitment to the ultimate integration of project concepts and staff into tribal programming.

3. Four community coordinators would be selected from the selected sites who are 45 years or older; and

4. These community coordinators would be bilingual.

Geographic Locations. NICOA decided to locate one Access Project site in each of the four Federal Regions with the largest Indian populations. These four Regions (Regions VI, VIII, IX, and X) together contain almost 80% of the nation's Indian tribes. Further, NICOA felt that by locating these sites in four geographically distinct areas, greater "representativeness" could be achieved, thereby providing a more accurate assessment of the status of the Indian elderly vis-a-vis their participation in entitlement programs.

The four sites selected offer an array of poli-socio-economic conditions that provide a wealth of variables that could affect the character of the model being developed by this project. Generally, Papago offers great distances, the high incidence of monolingualism, the presence of an international border (Mexico), and the high visibility of its aging program. Jicarilla Apache has the characteristics of a large geographical area, high incidence of monolingualism, the existence of an aging program, and high tribal resources. Oglala Sioux has the characteristics of a large geographical area, high incidence of monolingualism, increased Indian-non-Indian tensions and greater climatic variability. Finally, Siletz offers to the project its newly acquired status as a Federally recognized tribe with its inherent building-up process, increased variability in urban/rural populations and a higher level of acculturation. A more detailed description of the project sites follows at the end of this section.

PROJECT IMPLEMENTATION

All Indian tribes in Federal Regions VI, VIII, IX and X were identified, assigned a number, and separated by regions. Upon determination of the total number of tribes in these regions, 50% of this number were randomly sampled and selected as a baseline grouping. These tribes

were then screened for total numbers of Indian elderly. A criterion of the project was to select only those tribes which had more than 50 elderly Indians age 60 and over. Application of this criterion resulted in screening out a number of tribes from each Federal Region. A final random sampling process resulted in the selection of four tribes per Region. A rating scale developed by NICOA was then applied to the final 16 tribes resulting in a ranked order of sites (this rating scale has been attached as "Attachment A"). Through this process, the following tribes were selected in each of the targetted Federal Regions: Oglala Sioux Reservation, Region VI; Jicarilla Apache Reservation, Region VIII; Papago Indian Reservation, Region IX; and Siletz Indian Reservation, Region X.

Upon the selection of the sites, the tribal chairman of each of these tribes was requested to identify three individuals from his reservation who would be able to perform as the community coordinator for the Access Project. Upon the selection of the top three applicants, NICOA interviewed and hired the community coordinators on a consultant basis. NICOA proposed several mechanisms by which the community coordinators might be employed, and each of the four tribes was allowed to choose the option it preferred. One proposed alternative was for the tribe to hire the Community Coordinator as a tribal employee, with NICOA reimbursing the tribe directly. Each of the tribes selected decided against this alternative. Ultimately, the community coordinators were hired as consultants to NICOA. Contracts were developed for this purpose (Attachment B).

Community Coordinators. The major component of the Access Project is that which relates to the qualities and characteristics of the Community Coordinators. At the beginning of the project, it was felt that older Indian people were not utilizing the various entitlement service packages due to the inability of the service provider's non-Indian outreach staff to develop rapport with this target population. It was hypothesized that older Indians would be more responsive to receiving service packages if the community coordinators were from that particular community. Most elderly Indians, it was felt, would be reluctant and outright suspicious if the community coordinators were strangers from outside the community.

An additional consideration in the implementation of this project was the assumption that the age of the community coordinator was a significant variable. It was felt that by utilizing "older" Indians age 45+, the identification of elderly with the community coordinator would be greatly facilitated. The reason underlying the significance of the age

issue is that in most Indian cultures, the elderly are to be respected by the young. It is possible that an elderly Indian would interpret the forwardness of a youthful worker as being disrespectful and thereby reject the offer of assistance.

A final consideration in the implementation of this project was the barrier of monolingualism. In a recent research study by the National Indian Council on Aging, it was found that approximately one-quarter of the Indian elderly interviewed had less than four years of formal education. This fact would seem to suggest that Indian elderly would, at best, partially understand the nature of the questions asked by a non-Indian staff person. As a result, it was felt that the community coordinator must be able to speak the language of the target population. It was felt that through training, the community coordinators would be able to translate the entitlement regulations and criteria for eligibility enabling the elderly to understand. All the community coordinators were from the participating tribe. With the exception of one, all spoke their native language. The oldest was 54 and the youngest was 31. Three of them were single with three of them having received education beyond the secondary level. Three of the four were females.

Evaluation. The project design incorporated a year-end evaluation to assess the effectiveness of the project. This was to be accomplished through the analysis of the data that had been gathered and compiled by the project. Ideally, it would provide a "before" and "after" data base. The goal for each site was a 100% increase in service utilization. If there was a 100% increase, it could be assumed that the project was effective. If not, reasons were to be identified for the failure to reach the goal.

PROJECT SITES

As mentioned earlier, a more detailed description of the sites is provided to reflect the conditions and circumstances of each reservation.

JICARILLA RESERVATION

The Jicarilla Apache Reservation was established in 1887 by Executive order. Amendments in 1907 and 1908 adjusted the western border that adjoins the Carson National Forest.

HISTORY

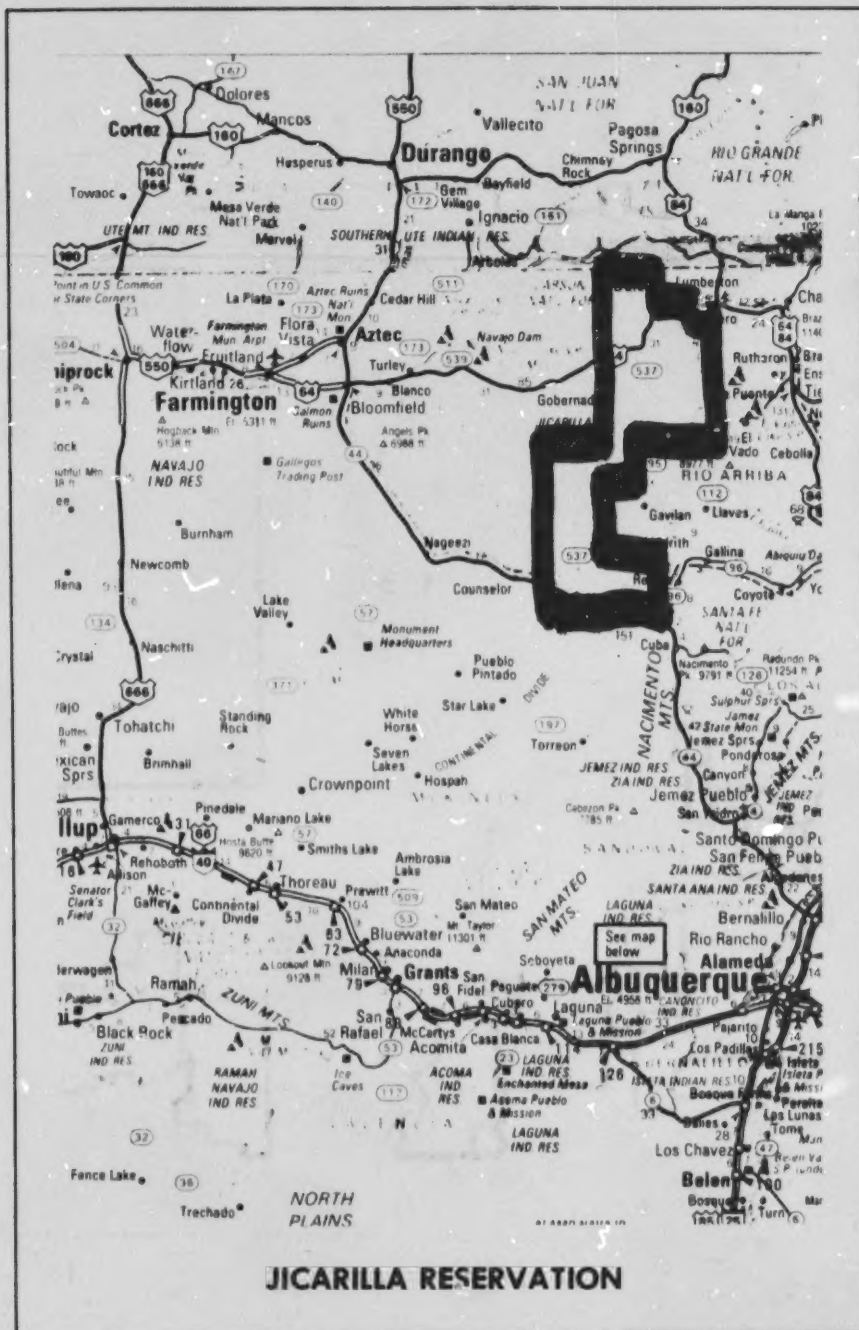
Long before the Spanish arrived in the Southwest, related Navajo and Apache tribes had made their way south to New Mexico and begun to drift apart culturally. The wandering Apache bands were divided into subtribes, subtribes into bands, and bands into groups made up of families related through the mother, with weak overall tribal linkages. The "small basket" or Jicarilla Apache lived in northern New Mexico, though their ancient lands included parts of Colorado and Oklahoma. Driven from this area in 1716 by the Comanche, they made new homes in north-eastern New Mexico. Though they began to farm, the Apache held to their tradition as great hunters and fighters until captured and subdued by the U.S. Army in 1880. After several relocations, the Jicarilla Apache were settled on their existing reservation.

CULTURE

The Apache were nomadic raiders closely related to the Navajo. They usually lived in wickiups, easily constructed and easily moved. In cold weather, skins were laid over the walls to provide added protection. Apache clothing was also made out of skins. Jicarilla means "small basket," referring to the pitch-sealed small baskets used by the Jicarilla as drinking cups. Apache religion was shamanistic, and the tribe also developed a rich mythology. Mountain spirits were believed to possess great powers of good and evil over people. The Apache feared the influence of both witches and the dead.

GOVERNMENT

The tribe is governed by a president, vice president, and eight councilmen serving 4-year terms. The councilmen serve staggered terms. The tribal constitution has provisions for Federal relationships, territorial boundaries, tribal membership, civil rights, elected tribal government, the powers of the tribal council, an executive department, and law and order.



TRIBAL ECONOMY

The tribal income, which averages \$800,000 annually, is largely derived from mineral leases. The remainder, between 20 and 30 percent, is provided through tribal businesses. Fifty people are employed in tribal activities. The tribe owns and operates the Jicarilla Apache Tribal Industries for which a plant is being constructed, a leathercraft shop, cattle sales barn, a liquor store, and a tourism enterprise, which includes a store and campgrounds. Tribal members own a laundromat and garage. The tribe has formed the Jicarilla Arts and Crafts, Jicarilla Buckskin and Leathercraft, and Land and Forestry Improvement organizations. There are a variety of commercial establishments in Dulce. Minerals existing on the reservation include natural gas, oil, and timber. Coal deposits, although sizable, are not being mined.

CLIMATE

Temperatures average between 42° and 48°. The summer median temperature is 60°; the winter median is 32°. Rainfall averages 19 inches per year; snowfall averages two feet each winter.

TRANSPORTATION

New Mexico Route 44 crosses north-south through the reservation. New Mexico Route 17 is an east-west highway passing through the reservation. The only commercial transportation serving the reservation is a busline, which takes passengers to Chama, 28 miles away, for connections to other areas. Truck service is available in Pagosa Springs, Colorado, nearly 50 miles from Jicarilla. The nearest commercial air service is located in Farmington, New Mexico, 86 miles from the reservation, or in Durango, Colorado, 109 miles distant.

COMMUNITY FACILITIES

The Jicarilla Reservation draws water from the Navajo River for industrial, domestic, and agricultural use. This is also the major source of electricity, together with the Utah Construction and Mining Company. Natural gas, a resource of the reservation, is purchased through the Southern Union Gas Company, or drawn from wells. Health care and clinics are offered through the U.S. Public Health Service (USPHS) at Dulce; however, the nearest hospital facilities for the tribe are at the

USPHS hospital in Santa Fe, New Mexico, 125 miles from the reservation. The tribe has both a tribal office building and a community building.

POPULATION AND SOCIO-ECONOMIC CHARACTERISTICS

The Jicarilla Apache Reservation comprises 742,315 acres and is owned by the Tribe. There are 1,928 Indians living on or near the reservation. The unemployment rate on the Jicarilla Apache Reservation is estimated to be 46%. The average grade level achieved is 7th grade.

PINE RIDGE RESERVATION

HISTORY

The Oglala Sioux are descended from the bands of Tetons who moved into the Dakotas from the area just west of the Great Lakes. Although habitually at war with other tribes, the Sioux did not actively resist white immigration until the whites began to intrude in great numbers and decimate the buffalo herds. With the beginning of the Plains Wars, the United States Government intervened, and a peace council was called near Laramie, Wyoming, resulting in pledges of peace. The treaty terms were broken with conflict resulting. Further treaty agreements were similarly disregarded by the incoming whites, and, after subsequent conflict, the Sioux were relegated to their reservations by 1890. In late December 1890, troops from the United States Cavalry intercepted a group of Sioux under Chief Big Foot on the Pine Ridge Reservation at Wounded Knee Creek. The Wounded Knee Massacre resulted in the slaughter of Indian men, women, and children as they fled.

CULTURE

The Teton division of the Sioux were originally a Woodland tribe with an economy based on hunting, gathering, and fishing, supplemented by limited horticulture. As the people moved westward they acquired horses, and their cultural pattern became that of equestrian nomads whose economic base was the bison, the horse, and trade. The Sun Dance was an annual religious ritual performed by the young men of the tribe during summer encampment.

GOVERNMENT

The Oglala Sioux Tribe is organized under the Indian Reorganization Act of 1934 and operates under a constitution and bylaws approved in January 1936. The 32-member tribal council is popularly elected and represents the many reservation districts. The council president is the administrative head of the tribe and heads the five-member executive committee. A schematic chart outlining the tribal organizational structure is included to allow visual comprehension.

The Pine Ridge Indian Reservation is divided into nine (9) districts within which the population of 13,000 Oglala Sioux make their home, and

those districts are: Eagle Nest, Medicine Root, LaCreek, Pass Creek, Wakpamni, White Clay, Porcupine, Wounded Knee and Pine Ridge Village.

Every two years, representatives are elected at large by the people from one of the above districts to serve on the governing body of the Tribe, the Oglala Sioux Tribal Council.

The Tribal Council members are then assigned to six committees: Budget & Finance Committee, Land Committee, Health, Education & Welfare, Law & Order Committee, Monitoring Committee, E.D.A. Committee.

POPULATION AND SOCIO-ECONOMIC CHARACTERISTICS

The Pine Ridge Indian Reservation is one of the largest Federally recognized reservations in the United States, consisting of 4,353 square miles located in the southwestern corner of South Dakota, and approximately 80 miles southeast of the Black Hills, 20 miles south of the Bad Lands and two miles north of the Nebraska state line. The reservation is located in Shannon, Washabaugh and Bennett Counties and is serviced by a variety of BIA, State and County maintained roads.

There are 1,161 miles of roads on the Pine Ridge Reservation, the State maintains 61 miles of blacktop, the BIA maintains 220 miles of blacktop, 280 gravel and the county maintains 600 miles of gravel roads.

Currently, there are 11,353 Sioux living on or near the Pine Ridge Reservation. The unemployment rate on the reservation is 42%. It is estimated that the average grade level achieved on the reservation is the 9th grade.

TRIBAL ECONOMY

The average annual tribal income is \$670,000. Eighty percent of this income is derived from grazing permits. The only two commercial and industrial establishments on the reservation, a supermarket and Pine Ridge Products, are owned by non-Indians. Clay suitable for pottery is found in large quantities on the reservation. Also semi-precious stones are found in small amounts.

CLIMATE

Rainfall averages 16 inches per year. The temperature varies from a high of 75° to a low of 23°.

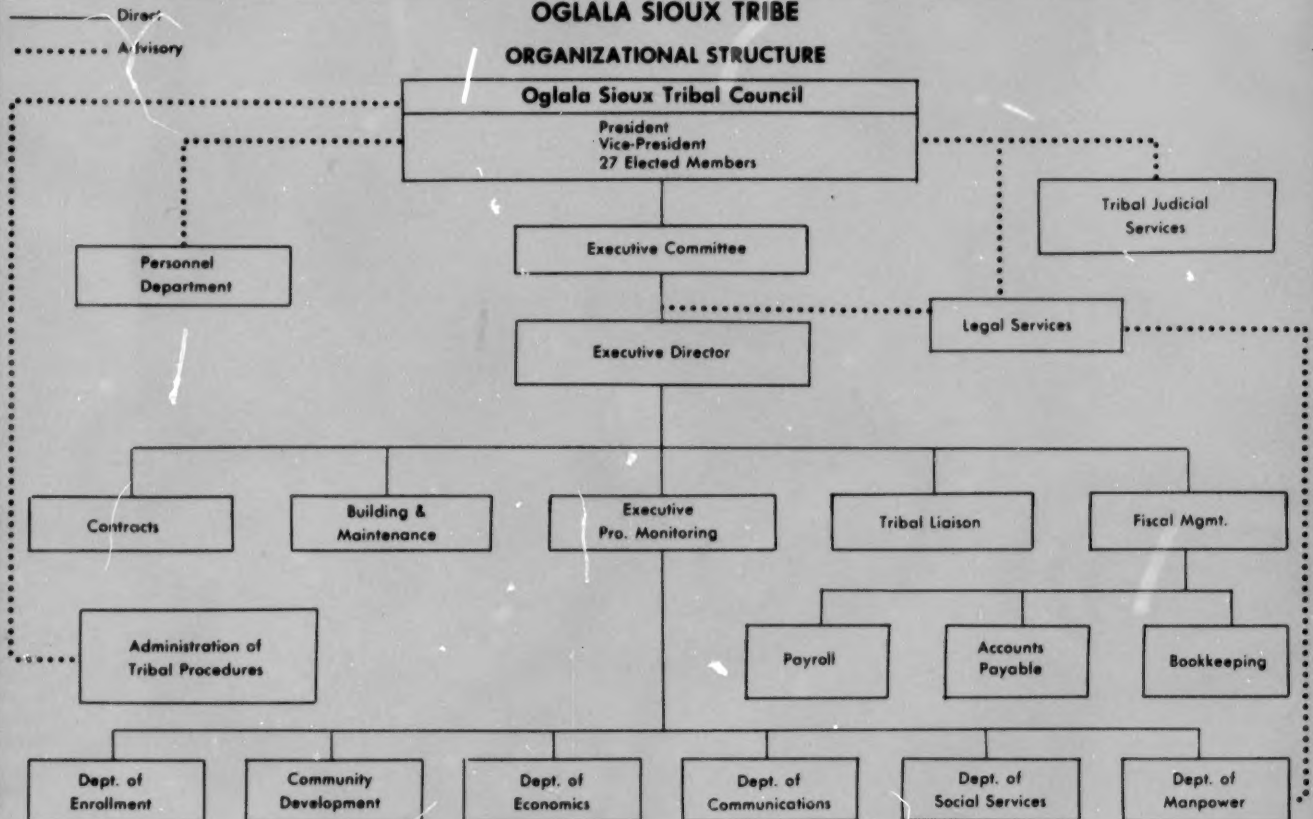
TRANSPORTATION

State Highway 73, a north-south route, and U.S. Highway 18, an east-west route, are the major traffic arteries. The nearest commercial airline service is located in Chadron, Nebraska, 57 miles distant. Commercial trains serve Rushville, Nebraska, 25 miles from the reservation. Bus- and trucklines stop in Pine Ridge.

COMMUNITY FACILITIES

Water is obtained from individual wells. Electricity is provided by the Consumer Public Power and the LaCreek Power Cooperative. The U.S. Public Health Service operates a hospital for the tribe in Pine Ridge.

**OGLALA SIOUX TRIBE
ORGANIZATIONAL STRUCTURE**



PAPAGO RESERVATION

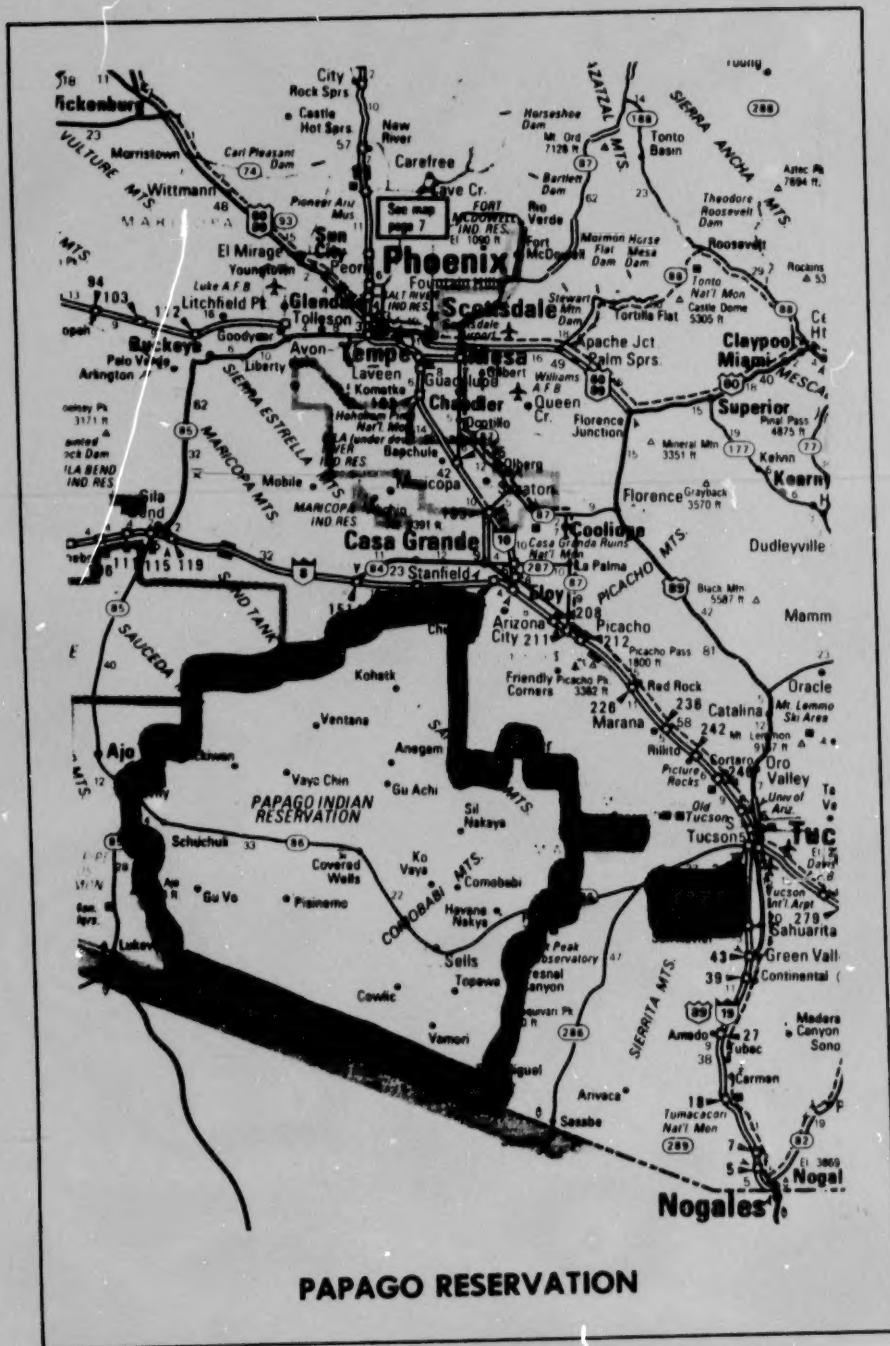
HISTORY

The Papago may be descendants of the Hohokam Indians who reached a high cultural level and flourished around 1,400 A.D. Another theory is that the Papago returned to their lands when the Hohokam disappeared. The Papago were an agricultural and semi-nomadic people who moved in search of water. Because their few sources of water were used by others, they became one of the poorest Indian nations in the Southwest. The Papago, together with the Pima and Maricopa, helped the United States force the Apache to peace in the 1860's. Because of their location in the extreme southwest desert, the Papago have been removed from the activity elsewhere in the country and are now making efforts to participate in the area's growth.

The Papago Reservation is located in the south central part of Arizona and is the second largest reservation in the United States. "Papago" is comprised of four reservation bodies, all of which are separate. The second smallest parcel, known as the Gila Bend Reservation, is located near the town of Gila Bend in Maricopa County. Gila Bend has a total of 10,400 acres of land. Another separate portion, known as the San Xavier Reservation, is located near the city of Tucson in Pima County. San Xavier was the first established reservation for the Papagos and contains 71,095 acres. Most recently approved (September 10, 1978), through an Act of Congress, was an additional separate portion of land composed of 20 acres, known as the Florence Village. Florence Village, located approximately 30 miles northeast of the northern boundaries of the main Papago Indian Reservation in Pinal County, has been added as the smallest officially recognized portion of the main Papago Reservation. The largest body of land is the Sells Reservation, also known as the main reservation. The bulk of the main reservation lies in Pima County with portions extending in Pinal and Maricopa Counties and contains 2,744,894 acres. At one time Papagos were in control of lands extending from Yuma on the west, Casa Grande on the north, the San Pedro Valley on the east, and the international boundary on the south (approximately nine million acres).

TRIBAL GOVERNMENT

The main reservation is divided into nine (9) districts, each having its own District Council comprised of representatives from each village



within the district. The San Xavier and Gila Bend Reservations are known as the San Xavier and San Lucy Districts. The districts elect two (2) representatives to represent them at the general council, which meets the first full week of each month in Sells. The 11 districts are: Baboquivari, Gu Vo, San Lucy, Sells, Chukut Kuk, Hickiwan, San Xavier, Sif Oidak, Gu Achi, Pisinemo, Schuk Toak.

Currently there are about 15,150 Papagos residing on the reservation with an estimated 5,646 more Papagos living off-reservation. Most of the Papagos off-reservation are employed in the cities adjacent to the reservation. Although the Federal, State, and Tribal governments employ many Papagos, there are still not enough jobs available on the reservation. Most of the other jobs are in mining, ASARCO/Phelps Dodge, Noranda Mining Inc., etc. Other jobs are available through the various other projects on the reservation, such as the building of schools, the newly completed Livestock Complex, the various HUD housing projects. A number of Papagos are employed by cattle ranchers, whose cattle herds may vary in size.

The tribal capital of Sells is located 60 miles west of Tucson, 72 miles east of Ajo and is 32 miles north of the international boundary. A series of paved roads cross the reservation, including the Tucson-Ajo highway (State Route 19). A small airstrip with a 6,000 foot paved runway is in Sells and is used by various programs. Utilities for the household are provided by the Papago Tribal Utility Authority, including electricity, water, and sewer systems. Cal Gas and Petrolane provide natural gas and Mountain Bell provides telephone services.

A new Space Technology Applied to Rural Papago Advanced Health Care (STARPAHC) system for providing medical services to Papagos was initiated recently by the Public Health Service (PHS) through the Indian Health Service (IHS). This consists of a mobile health unit which visits the outlying villages and is equipped with the latest in communication equipment and has direct access to doctors and information normally available only at hospitals. The IHS Hospital in Sells is a modern 50 bed facility staffed for general, medical, dental and field health services. Other medical services are available at the Santa Rosa Clinic, with referrals made to Sells Hospital.

TRIBAL ECONOMY

Minerals, including copper, gravel, building stone, and clay, are found on the reservation, and leases on these granted by the tribe provide the

main source of tribal income. Commercial and industrial development on the reservation is minimal. There are five automobile service stations and two cafes on the reservation. The copper mine and mill near Ajo employ the Papago. An industrial park has been completed on the San Xavier Reservation; it is located along State Highway 93, near Interstate Highway 19 on the outskirts of Tucson.

CLIMATE

The reservation is located in the desert, which typically enjoys hot days and cool nights. Rainfall varies from less than seven inches in the lowlands to 20 inches in the mountains. The growing season is 300 days, with temperatures varying from an average high of 90° to an average low of 50°.

TRANSPORTATION

Arizona Highway 86 runs through the reservation between Tucson and Ajo. Arizona Highway 93 joins Highway 86 northwest of Sells and runs north to Casa Grande. Interstate 19, a major route into Mexico, passes through the San Xavier Reservation. Interstate 8 connects the Gila Bend Reservation with Interstates 19 and 10, and Yuma, Arizona. Gravel surfaced roads connect towns on the reservation. Tucson serves as a major transportation center for the region south of Phoenix, and air-, bus-, train-, and trucklines provide ample service. A truckline also serves Sells.

CONFEDERATED TRIBES OF SILETZ INDIANS

TERMINATION

In the 1950's, Congress turned to the policy of "termination". The essence of the termination policy was the severing of the trust relationship between the Federal government and the various Indian tribes. Tribes would be cut off from all Federal benefits whatsoever. Much needed health and education services would be discontinued. Federal economic support would be cut off. Finally, all tribal land would be sold to the highest bidder.

Known as Public Law 588, the termination act for western Oregon Indians resulted in the sale of the remaining tribal lands. One exception was the 39 acres known as Government Hill which was donated to the City of Siletz.

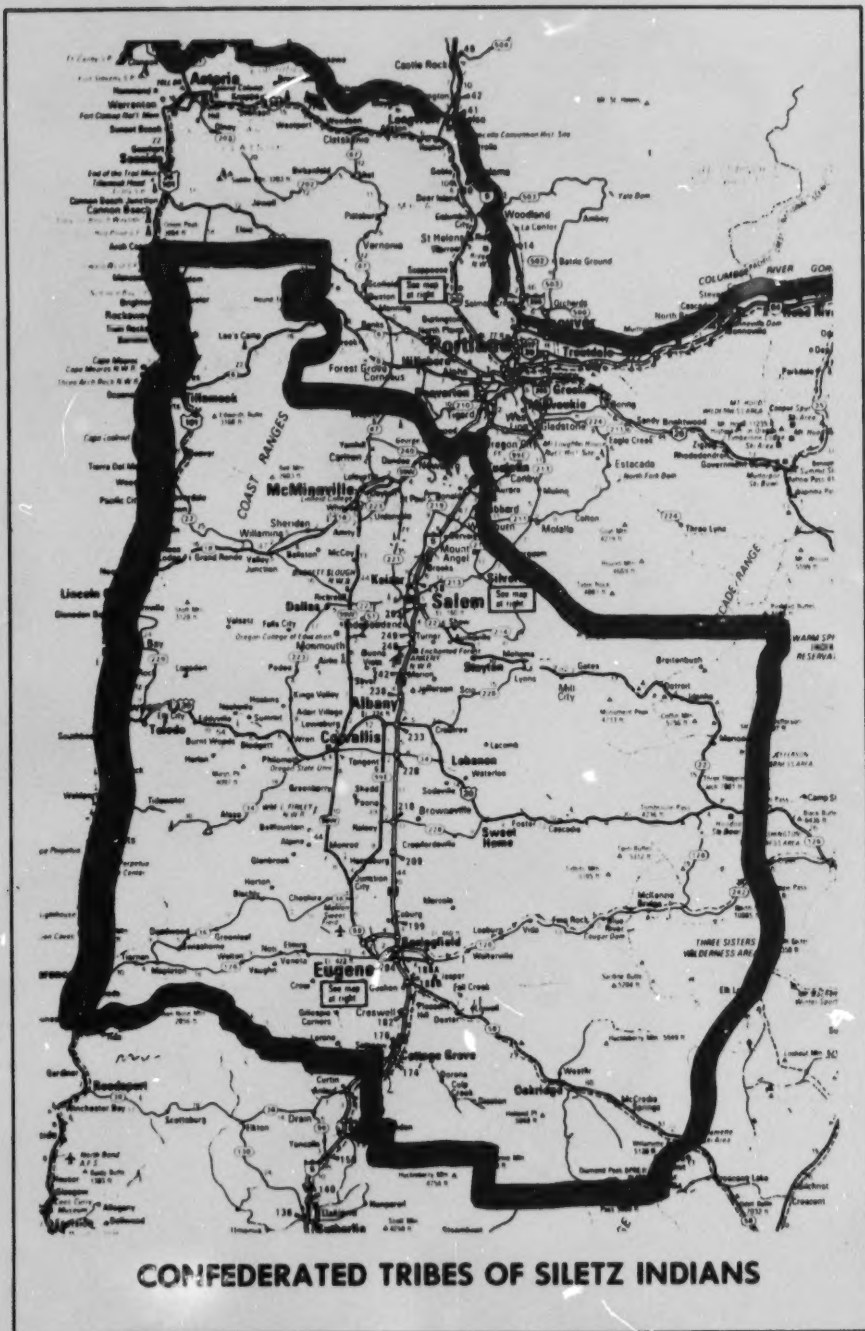
The termination act had a serious impact on allotment lands. For the first time, these lands were subject to property taxes. The Indians had never paid taxes and few had the means to do so. By 1960, many of the last lands that had belonged to Indians for centuries passed out of Indian ownership due to non-payment of taxes.

SILETZ RESTORATION ACT

Recognizing the effects of termination on their people, leaders of the Siletz Tribe worked to reorganize it in the late 1960's. They filed as a non-profit corporation under state law in 1973. The Tribe worked to restore the Tribal cemetery, to develop alcohol rehabilitation and manpower programs, and to provide other social services to its people. It became apparent to the tribal leadership, however, that the only way to succeed in reversing the trends of poverty, alcoholism, and despair was to re-establish Federal recognition of the Siletz Tribe.

Four years of intensive efforts resulted in passage of the Siletz Restoration Act, which was signed into effect by President Carter on November 18, 1977. The Act provides that once again the Tribe and its enrolled members are eligible for the assistance and benefits that the Federal government extends to all Federally-recognized tribes. The Tribe

Source: Proposed Siletz Reservation Plan, Sept. 1979, Bureau of Indian Affairs.



BEST COPY AVAILABLE

has regained its position as a sovereign people whose own government also is able to provide services to its people and to provide a proud sense of unity and identity for its members.

HISTORICAL PERSPECTIVE

The Siletz Tribe is made up of descendants of certain bands of Indians who lived along the Oregon coast for thousands of years. In 1855, a treaty was negotiated and signed by representatives of the Federal government and leaders of many bands which provided for the removal of the Indians to a great reservation on the Oregon coast. The Indians were removed from their native coastal lands to the Coast Reservation, but the treaty was never ratified. Instead, the reservation was officially created by an executive order, dated November 9, 1855. The Indians on the reservation became known as the Confederated Tribes of Siletz Indians of Oregon.

The Coast Reservation encompassed about 35 percent of the Oregon coast, and included over 1.1 million acres of some of the most scenic and timber-rich land in the world. Today, however, the Siletz Tribe is landless. This virtually unprecedented taking of reservation land was the result of the Siletz Tribe being subjected to each of the most unfortunate Indian policies of the Federal government: unratified and broken treaties, taking of executive order reservation land, removal, and allotment. The final blow in 1954 was "termination," the formal withdrawal of the Federal government's recognition of the existence of the Tribe. All of these policies have since been rejected by the Federal government, but the result to the Siletz Tribe was that piece by piece it lost all of its land, and for at least 600,000 acres it never received any compensation at all.

Passage of the Siletz Restoration Act in 1977 signified Congressional recognition that termination was disastrous to the Siletz Tribe, and marked the beginning of a new era in the Federal-Tribal relationship. Once again the Tribe is recognized as a sovereign people, subject to the Federal government's unique and continuing relationship with and responsibility to Indian people.

GEOGRAPHY AND SEASONAL VARIATIONS

The Confederated Tribes of Siletz Indians have an eight (8) county service area in northwestern Oregon. The 12,341 square mile service

area includes Benton, Lane, Lincoln, Linn, Marion, Polk, Tillamook and Yamhill Counties. The service area is bordered by the Pacific Ocean to the west; Clatsop, Washington and Clackamas Counties to the north; the Cascade Mountain Range to the east; and Douglas County to the south.

Two mountain ranges, the Oregon Coast Range and the Cascade Range, extend through the service area. Elevations range from sea level to 10,358 feet. Coniferous forests cover the mountains and farm and ranch land is abundant in the Willamette Valley. About 30 rivers flow through the service area.

The service area is large and climatic conditions vary from the coast to the Willamette Valley. The average winter and summer temperatures for each of the counties in the service area range from 38.2° in January to 66° in July. Precipitation averages range from 39.7 inches to 90.8 inches.

The service area is sparsely populated. Major cities within the service area include Eugene (pop. 103,500), Salem (pop. 90,000), Corvallis (pop. 40,500), Springfield (pop. 42,000), Albany (pop. 26,150), McMinnville (pop. 14,350), Woodburn (pop. 10,860), and Newberg (pop. 10,000).

The Southern Pacific Railroad provides limited passenger service (Amtrak) within the service area. Routine passenger service is provided only to the service area cities of Eugene and Albany.

Bus service is provided by Greyhound Bus Lines, Pacific Trailways or Mt. Hood Stages to most of the cities and towns in the service area. About 80% of the towns in which the Siletz Indian families reside have bus service. However, only 36% of the Siletz Indian families report having access to public transportation.

One major freeway, Interstate 5, runs north and south through the center of the service area. Highway 101 follows the coast line. U.S. Route 20 and State Routes 126 and 22 provide roadway access to the eastern and western boundaries of the service area. With the exception of Interstate 5, most roads tend to be narrow and winding. The roads are well maintained and passable year round. About 84% of the service population reported having easy access to all weather roads.

There are three major airports in the service area, McNary Airport in Salem, Corvallis Airport in Corvallis, and Mahlon Sweet Airport in Eugene. There are also many small public and private airstrips throughout the service area. The availability of scheduled commercial air trans-

portation is limited and getting worse as major airlines curtail their services. Many small communities have airstrips and charter service is available.

SOCIO-ECONOMIC PROFILE OF THE TRIBE

There are currently 1,083 enrolled members of the Siletz Tribe and 613 tribal families. Of these Siletz families, 48 percent live within the eight counties designated as the service area for the Tribe by the Bureau of Indian Affairs. The largest concentration of these families live in Lincoln County.

Over one-third of Siletz families living inside the eight-county service area and 18 percent of those living outside the service area have incomes below the official United States poverty level. The median household for Siletz families is less than one-half the state average, and the per capita income is only 38 percent of the state average.

Unemployment levels for tribal members are high. In Lincoln County, Indians have a 44 percent unemployment rate, and most of these Indians are tribal members. Additionally, Indians are heavily under represented in higher-ranked occupations, and over represented in lower-ranked occupations.

In Lincoln County, 20 percent of those persons receiving public assistance are Indians. This over representation in social service case-loads is a measure of the need within the Siletz Tribe for a broad range of special programs.

Tribal members suffer from severe health problems. Forty-four percent of deaths are due to cardiovascular disease. Diabetes, cancer, and ulcers are other major causes of death. Nutritional deficiencies are widespread, and undoubtedly contribute to the high incidence of other problems. Alcoholism affects nearly every Siletz family. Tribal members have difficulty securing routine health care, and there is no tribal facility to provide such care.

Nearly 20 percent of Siletz family housing within the service area has either substandard water facilities, septic facilities, or both. Twenty-eight percent of Siletz families live in substandard housing, a figure significantly above the state average.

Nearly half of the adult tribal members did not complete their high school educations. This drop-out pattern continues today among the young people.

GENERAL COUNCIL

All enrolled members of the Confederated Tribes of Siletz Indians of Oregon who are over the age of 18 years constitute the General Council. The General Council has the power to elect Tribal Council members and approve or disapprove any compensation for them other than reimbursement of expenses. They also have the powers of initiative and referendum; to recall elected tribal officials; to amend the Constitution; and the power to make advisory recommendations to the Tribal Council.

TRIBAL COUNCIL

The Tribal Council consists of nine members elected by the General Council to terms of three years each. The terms are staggered.

The Tribal Council elects from its membership a Chairman, Vice Chairman, and Secretary-Treasurer. The Tribal Council is empowered to exercise all legislative and executive authority of the government. This authority includes, but is not limited to, the power to employ legal counsel, the choice of counsel and fixing of fees to be subject to the approval of the Secretary of the Interior; to prevent the sale, disposition, lease or encumbrance of tribal lands, interests in lands, or other tribal assets without the consent of the tribe; and to negotiate with the Federal, State, and local governments.

TRIBAL MANAGEMENT

At present the tribal offices are located on rented property in a building owned by and shared with the Bureau of Indian Affairs in Siletz.

Ten paid full- and part-time staff members are responsible to the General Council and Tribal Council for overall management of tribal affairs and enrollment of new members. This staff includes the general manager, an accountant, a bookkeeper, an executive secretary, a secretary to the Tribal Council, and five enrollment committee members. The 1979-80 tribal management and program staff organization chart is included on Page 41.

Duties and Responsibilities. The enrollment committee processes membership applications and prepares a roll of those persons eligible



1. OFFICE SERVES LINN, BENTON, AND LANE COUNTIES.
2. OFFICE SERVES TILLAMOOK AND LINCOLN COUNTIES.
3. OFFICE SERVES MARION, POLK, AND YAMHILL COUNTIES.

for tribal services and membership in the Tribe. Tribal management personnel also assist the Tribal Council in designing programs to meet tribal needs, although these personnel are not directly involved in program administration. Management also publishes a monthly newsletter for tribal members, and hires employees for each of the three tribal area offices.

Tribal management also administers some training programs, brings members together for meetings, attends and makes arrangements for Tribal Council members to attend regional and national meetings with Federal agencies and other tribes, and helps with the annual audit of tribal programs. Tribal funds have been used to hire management and accounting consultants.

Funding Sources. Funds for tribal management come primarily from three sources. The BIA's Formula Share program provides the bulk of operating expenses. Supplemental funding comes from the BIA's Aid to Tribal Government Program, and from the Small Tribes of Western Washington (STOWW), a non-profit organization of Indian tribes. Because of the large number of service programs proposed and coordinated by the tribal management, the office receives additional money from the BIA's Indirect Cost Funding Program.

SECTION III:
FINDINGS

III. RESEARCH FINDINGS

OVERVIEW

The principal objective of the Reservation Access Project was to identify the status of Indian elderly vis-a-vis their participation in the primary entitlement programs such as those emanating from the Social Security Administration, Veteran's Administration, Department of Agriculture, and the Bureau of Indian Affairs.

An integral but subordinate objective was to assist these elderly into the service delivery system and subsequently the development of a data base that reflects the effects of the efforts of this project.

Finally, a corollary objective which subsequently became a major focus of the project was to develop innovative outreach techniques and modalities that could be replicated and implemented by other Indian tribes across the country. In addition to this focus, a concomitant objective was to assist service delivery agencies at the national level in the development of these new outreach techniques within these entitlement programs.

On the following pages are a descriptive presentation and analysis of these data sets.

RESULTS

The NICOA Reservation Access Project identified 1,386 Indian elderly age 55+ during the course of the 12 month project. The data indicate that 47% of the sample were males and 53% females. This is generally true of the larger society in its tendency of females to outnumber males within these age cohorts. 47% of the Access sample were married; 46% were widowed; 2% were divorced, 4% were single; and less than 1% were separated. In a recent national study completed by the National Indian Council on Aging, it was found that 49.5% of the elderly 55+ were married; 35.7% were widowed; 5.5% were divorced; 6.8% were single; and 2.5% were separated. A cursory review of this data indicates a higher than average widowhood rate among those sampled in the Access Project compared to the national study.

The data also indicated that 63% of the Access elderly sample lived in their own homes with most paying rent to local housing authorities; 3% lived with their sons; 4% lived with their daughters; 25% lived with other relatives and 2% lived with others — usually in a nursing home. It is clear

that the elderly do not live with their offspring to the extent they do with other relatives. In separating out the living arrangements of the elderly by sex, the data indicate that 67% of the males compared to 61% of the females lived in their own homes; 2% of the males compared to 4% of the females lived with their sons; 3% of the males compared to 5% of the females lived with their daughters; 25% of the males and an equal percentage of the females lived with relatives; and finally, 1% of males compared to 2% of the females lived with others. A further breakdown examining the living arrangements of those widowed indicates that 32% of widowers compared to 38% of the widows lived in their own homes; 4% of the widowers lived with their sons compared to 5% of the widows; 7% of the widowers compared to 9% of the widows lived with their daughters; 51% of the widowers lived with relatives compared to 40% of the widows; and finally, 1% of the widowers lived with others compared to 2% of the widows.

The data would seem to indicate that the tendency of the elderly to rely upon relatives other than their offspring reinforces the concept of the extended family. The existence of this kinship system is significant in the models of outreach that can be implemented by service providers. These will be discussed in the recommendations section of this report. A series of graph charts are included in the appendix that break down the living arrangements of the elderly in the aggregate and by tribe. (pp. 92-94)

In reviewing the service/program participation rates, the highest program participation rate is within the Medicare program with a rate of 51%. However, those elderly who are widowed are participating in the Medicare program at a level of 59%. It is interesting to note that the participation rate of elderly Indians in the Bureau of Indian Affairs' General Assistance program is 8% and the concomitant rate for widowed elderly is 5%. The data on widowed elderly receiving disability payments from the Social Security disability program suggests that elderly Indian widowers are 2.6 times as likely to be disabled as their female counterparts. While the total widowed population in the Access sample equalled 47%, it is significant to note that only 25% of the widowed population is receiving Social Security survivor's benefits. The ramifications of this imbalance should be more severe among the surviving widows by virtue of the fact that they outnumber widowers by a ratio of 1.8:1. However, the data indicate that only 5 widowers are receiving benefits, or 2%, compared to 142 widows, or 38%.

In summary, the overall review of the results of the project indicate a significant level of involvement of Indian elders in some programs while others indicate a need to improve efforts to reach out to this population. It is noteworthy, for example, that only 2% of the elderly are taking advantage of the 72+ benefits regarding outside employment for additional income without jeopardizing their Social Security benefits. It is possible that this data reflects the lack of job opportunities on the reservation with a corresponding reflection of the disinterest of the tribe to provide these opportunities for their elders. It is also possible that this information only verifies the fact that not too many Indian elders attain this age and if they do, might be disabled to the point of not being able to be gainfully employed. Detailed charts outlining service participation rates for all elderly and widowed elderly are included in the Appendix, pp. 95-96. In the following paragraphs, a site-by-site analysis will be provided to indicate the significance of the project variables in the implementation of this project in the respective areas.

JICARILLA

The elderly population sampled totalled 74. The average age was 69.3. The average age of the elderly males was slightly higher than that of their female counterparts, 70.2 vs. 68.5. 49% of the sample were males, with 51% females. The marital status of the elderly indicates that 35% are married; 43% are widowed; 15% are divorced; and 5% are single.

Their housing arrangements indicate that a majority live in their own homes, or 69%. Very few live with their son or daughter and a significant number seem to prefer to live with other relatives (14%). It is possible that the elderly would not want to position themselves to be a burden upon their children. It is noteworthy that 90% of the widows who reside with their offspring are living with their sons and not their daughters. This might be due to the fact that it is usually the males that have employment and would be most able to support an additional person in the household.

A cursory review of the data relating to services utilization (see the charts in the Appendix, pp. 95-96), indicates that the highest utilized service is the tribal dividends. 86% of the elderly receive these stipends. These dividends are moneys returned to tribal members that are earned through the sale of tribal resources such as oil leases, timber sales, etc. As a result of this "income", most elderly are ineligible for most of the Social Security programs and the U.S. Department of Agriculture's programs.

The initial community coordinator from Jicarilla during the course of this project experienced difficulties and was terminated halfway through the project year. She, nonetheless, initiated contact with the elderly during that time period. The subsequent coordinator was a male, a former tribal chairman, and as a result, was known by the people he dealt with. Both community coordinators were under 45 years of age, lived on the reservation, and both spoke their native language. In the initial implementation of the project on the Jicarilla Reservation, the Tribal Chairman was contacted by the Project Director to solicit names of individuals for the position of community coordinator. The project purpose was explained to the chairman and based upon this description, his assistance in identifying potential candidates was requested. Three individuals were identified, interviewed, and finally a finalist was selected. As a result, the age of the individual finally selected deviated from the original design. Six months into the project, the incumbent was terminated. Problems began almost immediately. Reports were late, but the quality of the reports was, however, adequate. Data sheets were developed to gather information about the elderly person.

The questionnaire was designed to gather baseline data and was formulated by the Access Project Director.

Both community coordinators journeyed into the community and upon obtaining a list of elderly, interviewed those elderly that could be interviewed. The community coordinators, in addition to surveying the elderly, referred those needing services to agencies providing them. In reviewing the performance of the community coordinators, it is clear that their age did not interfere with their dealing with the elderly of the tribe. However, the fact that they were bilingual helped to establish quick rapport and facilitated the exchange of information. The community coordinators were required by their contract with NICOA to submit the data sheets, written reports, and reimbursement forms on a semi-monthly basis. Guidance was provided by the Access Project Director through the utilization of telephones and written communication.

Interviewing Jicarilla Apache elderly was difficult due to the elderly either not being home or to the lack of contact due to weather conditions. From late November through early March, winter was especially treacherous. Snowfall prevented the opportunity to travel to various parts of the reservation. Telephones are not readily available to the elderly and the survey indicates that only 5% of the elderly have telephones in their homes. Of the total 580 miles of roads on the reservation, only 69.7 miles are paved. Due to these two circumstances, contact was fragmented and sporadic.

Both community coordinators were trained by the Access Project Director in conjunction with those provided by the staff members from cooperating agencies. The training consisted of an introduction to NICOA, the Access Project, the various entitlement programs and corresponding criteria for eligibility.

In assessing the impact of the project on the Jicarilla Apache Reservation and specifically on the Apache elderly, the results are inconclusive.

The survey of the Apache elderly revealed a lot in relationship to their living arrangements, their service participation rate, and basic social characteristics. The Jicarilla elderly have a significantly higher divorce rate than the other elderly populations sampled. This could exacerbate the already deteriorating quality of life for the Apache elderly. It is obvious that as a result of the tribal dividends that are made available to all members of the tribe, most elderly become ineligible for services from the Social Security programs and the food stamps/commodity

programs. These programs are means tested and therefore income-related. However, the data suggest that the dividends are inadequate as evidenced by the high number of elderly receiving BIA General Assistance payments. It is also likely that the eligibility criteria for BIA General Assistance is less strict than those in the Social Security and Food Stamps/Commodities programs.

In the area of generating an "after" picture, the results are less than conclusive. A true composite identifying the number of elderly receiving entitlement programs as a result of the Access Project is difficult to conclude. This is due partly to the process that was utilized in selecting and monitoring the activities of the community coordinators. Because they were consultants to NICOA, on-site supervision was not readily available to ensure that goals and purposes of the project were implemented and achieved. The major problem that was encountered concerned the amount of time that was necessary to identify and contact the elderly. Referrals were made to agencies and the time necessary for follow-up was inadequate. The necessary termination of the original community coordinator caused a considerable amount of time to elapse before hiring another coordinator. This resulted in lost time and a tremendous amount of duplication of effort. For example, the new community coordinator proceeded to implement data gathering activities when that phase of the project had been essentially concluded by the first coordinator. Referrals made by the first community coordinator were not followed up by the second coordinator, resulting in a lack of data to measure the increase in service participation that could be attributed to this project.

PINE RIDGE

The data indicate that a total 665 Oglala Sioux elderly were identified and surveyed. The average age was 71.4. There was no significant difference in the average age between males and females, 71.1 vs. 71.8. 48% of the sample were males, with 52% females. The marital status of the Oglala elderly indicates that 52% are married; 41% widowed; 2% divorced; 3% are single; and 0.6% are separated.

Their housing characteristics indicate that a majority of the Sioux elderly live in their own homes, or 68%. Few live with their offspring, but if they do, more seem to prefer to live with their daughter than their son, or 3% vs. .002. This could reflect a cultural characteristic where the daughter is traditionally responsible for the elderly parent. How-

ever, as with Jicarilla, a significant number prefer to live with their relatives than with their children, or 24%. The reasons for this could be similar to the Jicarilla site — the elderly might not want to "burden" their children with their presence. An additional consideration is the inherent need to seek out those who are in a similar age group, have a common history, and a common cultural understanding. To most of today's Indian community, the differences from one generation to the next have been great due to the effect of accelerated change on the tribe. It would be unlikely that the Oglala Sioux were fortunate enough to escape this phenomenon.

Unlike their Jicarilla counterparts, widowers usually do not live in their own homes (72%). The data suggest that upon widowhood, most (58%) move in with relatives other than their offspring. Widows, on the other hand, show a tendency of staying in familiar surroundings, evidenced by the 52% who remain in their own homes. The data also suggest that widowers are more likely to be disabled (20%) than their female counterparts (9%). It is likely that upon widowhood, these disabilities are severe enough to force the widower to move in with relatives to ensure that he is cared for.

In reviewing the data relating to services utilization (see charts included in the Appendix, pp. 95-96), Oglala Sioux elderly are more likely to have access to and utilize Food Stamps (83%), Medicaid (77%), and Medicare (66%) than their counterparts on the Jicarilla, Papago, or Siletz Reservations. They do not receive tribal dividends as do their Jicarilla counterparts. The utilization rates in these programs indicate that the Oglala elderly are far from affluent and therefore require these programs to survive. The fact that the Oglala Sioux Tribe administers its own Food Stamps/Commodities program could contribute to the high utilization rate in these programs. While 41% of the Oglala Sioux elderly are widowed, only 22% of that population are receiving Social Security Survivor's benefits. Widowers on the Pine Ridge Reservation are not likely to receive survivors benefits as compared to widows (4% vs. 78%), while simultaneously, they represent 37% of the widowed population. The Bureau of Indian Affairs' General Assistance program is not utilized to the same extent as on other project sites. Only 5% are receiving benefits from this program.

The community coordinator on the Pine Ridge Reservation was female, met the 45+ age requirement, and was proficient in the Lakota language. This characteristic was especially valuable during the incipency of the project on the Pine Ridge Reservation. She had had previous

program experience and therefore was knowledgeable about the various entitlement programs. She was identified by the Tribal Vice-Chairman and the director of the ANA social service program as a candidate for the position. The community coordinator, as with the other coordinators, received no on-site supervision and hence, no daily guidance from her supervisor, the Access Project Director. Once the coordinator was selected, an inordinate amount of time was spent searching for and obtaining an accurate listing of the Oglala elderly with their last known place of residence. The community coordinator then began the process of interviewing the elderly. The process of identifying the elderly, proceeding to their residence, and finding them at home was basically a trial and error method. The Pine Ridge Reservation is broken down by political districts and the community coordinator decided to use these districts as her surveying districts. At the beginning of this paragraph, it was noted that the ability of the community coordinator to fluently communicate in her native tongue enabled the survey to continue. The elderly were initially suspicious of the survey and were reluctant to provide any information about themselves to the community coordinator. But through the efforts of the community coordinator explaining the project goals and purposes in the Lakota language, the fears of the elderly were alleviated.

The variability in extremes of weather conditions proved to be a major obstacle in the completion of the project on scheduled milestones. The large numbers of elderly on Pine Ridge required that a great amount of time be expended just to complete the initial phase of the project — data collection. The community coordinator, in addition to these activities, made referrals to service agencies and follow up on these referrals required an extensive amount of time. In reviewing the reports submitted by the community coordinator, a major role that was created by the needs of the elderly was to assist them in filling out food stamps forms, Aid to Dependent Children forms and writing letters for the elderly to the various social service agencies. The reports that were submitted by the community coordinator at the beginning of the project were qualitatively better than those submitted toward the end of the project. There were great amounts of time when the coordinator was on leave status and, as a result, follow-up data is not readily available. Reports indicated that a number of the elderly were referred to service agencies, but failed to provide information on the status of those efforts. In many instances, the community coordinator assumed a service broker role, i.e. identification of the problem, identifying appropriate services, linking the individual with these services, and in some

instances, bringing the services to the elderly. An example of this was assisting the elderly in filling out food stamps forms, taking these forms to the food stamp office, and bringing the food stamps to the elderly. In some instances these roles were documented. However, this was not a consistent effort. A systematic tracking system was not implemented which would enable the project to accurately monitor the individual, rather than making a one-time contact. In randomly selecting two reports submitted by the community coordinator that covered two months of project activities, the reports indicate that a total of 179 Oglala elderly were contacted and surveyed. Of these, 77 were assisted into the service delivery system. Twenty-seven, or 35%, were assisted in receiving USDA entitlement programs such as food stamps or the commodities program. In reviewing subsequent reports, the detail of program activities deteriorated to an unusable level and conclusions would be speculative. As a result, a "before and after" picture would be spotty and inconclusive.

PAPAGO

The elderly population sampled totalled 593. The average age was 70.1. The average age of the elderly men was slightly higher than their female counterparts, 71.0 vs. 69.5. 45% of the sample were males, with the remaining 55% females. The marital status of the elderly indicates that 42% are married; 53% are widowed; 0.7% are divorced; 3% are single; and 0.7% are separated.

The housing arrangements data indicate that a majority live in their own homes, or 55%. As on the other project sites, very few live with their sons or daughters, or 6%. Again, as with other sites, a significant number (29%) would prefer to live with their relatives other than their offspring. The living arrangement of widowed Papago elderly is similar to their Sioux counterparts. The majority of both widowers and widows choose not to live in their own homes upon widowhood, 70% and 76% respectively. It is likely that most do not want to be isolated from their community, friends, and relatives. Again, a significant number choose to live with relatives other than offspring, with widowers (50%) more likely to choose this option than their female counterparts (47%). Contrary to the trends set by the preceding project sites, a significant number of widows (14%) chose to live with their daughters. It is possible to assume that this is a characteristic of the Papago culture — where children are expected to care for their parents and more specifically, their mothers.

In reviewing the services utilization data (see charts in the Appendix, pp. 95-96), Papago elderly are more likely to have access to and utilize the Commodities program (56%), the Supplemental Security Income program (47%), and the Medicare program (38%). It is significant that the Papago elderly utilize the Commodities program to a much greater degree than Jicarilla (0%), Pine Ridge (10%), or Siletz (13%). This could be attributed to the great distances involved in getting to the nearest store and utilizing the food stamps coupons. It would be economically unfeasible for the elderly, most of whom do not have access to transportation services. The Papago Tribe also administers its own commodities program and this could partially explain the high utilization rate. While 53% of the Papago elderly are widowed, only 3% of this population are receiving Social Security Survivor's benefits. In addition, only 3% are receiving survivor's benefits from the Veterans Administration. Papago elderly are not affluent, evidenced by the number receiving S.S.I. benefits (47%) and the commodities program, both of which are means-tested. In reviewing the data related to the utilization rates of the Medicaid and Medicare programs, Medicaid benefits are not being utilized by the Papago elderly (0%). The reason for the non-participation in this program is that the Papago Reservation is in the state of Arizona. Arizona is the only state in the Union that does not have a Medicaid program. A few years ago, the state legislature passed a bill enabling Arizona to become participatory in the program. However, it became a paper program because the state legislature did not appropriate the necessary matching funds to draw down the federal dollars. The elderly Papagos do not benefit from the Bureau of Indian Affairs General Assistance program to the degree that either Jicarilla or Siletz elderly do (7% vs. 32% and 11%, respectively). It is not known why this is the case, however, it could be suggested that the criteria for eligibility might be more stringent than the other programs or that the elderly are not a high priority in the receipt of these services.

There were two community coordinators at the Papago site during the project year. The first coordinator was a male, age 45+, and bilingual. He resigned approximately halfway through the project due to health problems. He, like the other community coordinators, was nominated by the Tribal Chairman with the assistance of the elderly program director for the tribe. The second community coordinator was also a male, 45+, and bilingual. Both community coordinators traveled extensively to identify and survey the Papago elderly. Again, as with the other project sites, weather conditions played a significant role in delaying the accomplishment of major milestones. Winter in the deserts of

Arizona means precipitation (mostly rain). With 504 miles of its 748 miles of roads unpaved, travelling out into the country is especially treacherous. Due to the unexpected resignation of the original community coordinator in the month of December and the subsequent hiring of the second community coordinator in late January, problems experienced here were similar to the Jicarilla experience. There were duplicated activities, a general lack of understanding of the goals and purposes of the project, and the inevitability of the elderly who were referred to programs to "drop through the cracks". In the non-Indian community, this could be remedied by telephoning the elderly, but with only 21 elderly having telephones, travelling back to these areas were basically trial and error. As it is with the Jicarilla and Oglala Sioux, the elderly on the Papago Reservation are constantly moving, which presents problems for the community coordinator. Due to these circumstances, an accurate picture indicating the impact of this program cannot be drawn. The reports do indicate referrals to programs, but they are not delineated as to their status. The community coordinators spent a significant amount of time interfacing with the various entitlement programs and as a result, their ability to negotiate the system was enhanced. It is not known whether these learned skills were utilized when the community coordinators were advocating on behalf of the Papago elderly.

SILETZ

The elderly population sampled totalled 54. The average age of the elderly was 67.1. The average age of the males was slightly higher than that of their female counterparts, 68.2 vs. 66.4. 41% of the sample were males with 59% females. The marital status of Siletz elderly indicates that 52% are married; 28% widowed; 4% divorced; 13% single; and 1.9% separated.

The housing arrangement data indicate that Siletz elderly are more likely than their project counterparts to live in their own homes, or 89%. The trend of elderly Indians not living with their children is repeated here, but the tendency to move in with relatives is equal to the rates for the offspring arrangement, or 1.9%. This is a significant deviation from the norm that was established at the other three project sites. It is possible that this is indicative of the influence of the non-Indian community on the elderly — or that similar aged relatives are spread throughout a large land area (a remnant of the effects of termination). Elderly females are three times as likely to live with either their offspring, relatives, or others, than their male counterparts. It should be noted, how-

ever, that due to a smaller sample size, it would be extremely difficult to generalize from these findings.

In reviewing the services utilization data (see charts in the Appendix, pp. 95-96), Siletz elderly are more likely to have access to and utilize Medicare (59%), Social Security Retirement Benefits (41%), and Disability benefits (22%). The data suggest that the elderly on the Siletz Reservation are more likely to be disabled than their counterparts at the other project sites. More astounding is that 67% of the widowers and 33% of the widows are receiving disability payments from the Social Security program. In examining the type of industry in Oregon, the high disability rates might be attributed to the lumber industry, which is a demanding and physical occupation. 32% of the Siletz elderly males are receiving disability payments while 16% of the female elderly are receiving disability payments, rates that are higher than all the other project sites. Moreover, the Medicare utilization rates of 77% for elderly males and 47% for females suggest that these disabilities are debilitating enough that medicare benefits are a necessity for this population. Supplemental Security Income benefits are utilized at a significantly lower rate (7%) as compared to Jicarilla (42%), Pine Ridge (47%), and Papago (47%). Yet, the data indicate that the Bureau of Indian Affairs' General Assistance payments are utilized at an 11% level, the second highest utilization among the selected sites. It is interesting to note that the two smallest tribes utilize the BIA program at higher rates than the two larger reservations. It is possible that this can be attributed to the familiarity that agency workers have with tribal members when the tribe is small.

The community coordinator from Siletz was a female, college level education, did not meet the 45+ age criterion, and was not bilingual. However, these characteristics were directed as strengths and did not affect her ability to relate to and assist the elderly in negotiating the service delivery system. The community coordinator was selected from among three candidates identified by the Siletz Tribal Chairman. Initially, the coordinator was stationed in the Siletz Area Office, but was subsequently moved due to shortage of space. The initial activity of the Siletz community coordinator was to identify the Siletz elderly residing in the eight county Siletz service area. Concurrently, activities were initiated to meet with service providers to inform them of the goals and purposes of the Access Project. Again, the initial phase of the project consisted of data gathering, similar to the other project sites. A minor problem that was encountered was the inclusion of new Siletz tribal

members due to a change in blood quantum requirements for enrollment in the tribe. At best, the census was inadequate due to its outdated listing of the elderly of whom some had moved, died, or just disappeared. The community coordinator had to travel extensively throughout the project due to the large geographical service area of the Siletz Tribe. After contact was made with service providers in the eight county area, referrals were made by the community coordinator to appropriate service agencies. In addition to these activities, the community coordinator's role changed with the demands placed upon her. In addition to referrals, advocacy on behalf of individuals and groups of elderly Indians before commissions on aging, conferences on aging and training programs became an integral and complementary activity. The activities generated on the Siletz Reservation by the community coordinator spelled the need to change the data instrument to meet the needs of the community and the Access Project. It is significant to note that this site was the most creative and productive of all the project sites. As a result, Siletz has the most useful information as it relates to the goals and purposes of the Access Project.

Overall, the Siletz project identified 54 elderly. Twenty-two elders or 41% of this target population were referred to programs and received the services for which they applied. 23% of services received were for housing renovation programs and 18% were for the Supplemental Security Income program. This represents an increase of 400% in the SSI program.

A significant development that grew out of this project is the recent passage of legislation that lowers the age criterion for Indians to age 45 for certain Older Americans Act benefits. The community coordinator played a significant role in the passage of this legislation. In addition, an innovative approach utilized by the Siletz community coordinator was to recruit volunteers to assist in completing the project. One of the volunteers was subsequently hired full time by an area agency on aging as an outreach worker for American Indian elderly.

SECTION IV:

ISSUES

AND

RECOMMENDATIONS

IV. CONCLUSIONS

The goal of the Access Project was to increase the number of Indian elderly participating in entitlement programs by 100%. It was to be accomplished and measured by developing a survey instrument, administering the instrument, and compiling baseline data that could be utilized for a pre- and post-project analysis to determine the effectiveness of the project in each of the selected sites. The results of this project are inconclusive as related to the predetermined measurement — an increase of 100% in the numbers of elderly Indians receiving entitlement services.

A secondary thrust of the project was to develop a model outreach program that could be replicated by other Indian communities across the country and thereby increase their elderly's participation rate in these programs as well. It is possible to infer that an approach has been developed and tested by this project. In some instances, long-held beliefs were proved to be erroneous while others surfaced which ran counter to popularly-held ideas within the Indian community. In the following sections, the goal of this project will be discussed as well as the concept of model development.

Model Development vs. Goals

The conceptualization and implementation of this project was imbedded in the assumption that many older Indians are not receiving services to which they are entitled because they do not know about these programs, or do not understand the complexities of the rules, regulations, and criteria inherent to each program. The hypothesis to be tested was:

"If bilingual Indian people 45+ are hired and trained regarding these programs, they can explain these programs in their native tongue to the elderly and thereby increase their comprehension of the programs and hence, an increased number of Indian elderly would be eligible."

The components of this hypothesis included the following:

1. Bilingual Indian people 45+ — the results of the data and experience of the project seem to indicate that bilingualism is important if the tribe to be dealt with is traditional in nature. The elderly

in these communities felt good that someone thought enough of them to send them a person with whom they could talk and understand. In receiving the information submitted by the community coordinators, there seems to be an implicit message regarding the reactions to them as community coordinators and that this subtle message is correlated with the sex of the community coordinator. It seems that the male coordinators did not develop the rapport with the elderly that the females did. Qualitatively, the reports from the females provided an abundance of helpful subjective perspectives. On the other hand, the men submitted reports that were short and contained pure objective detail.

The age of the community coordinator was considered to be important at the beginning of the project. However, the most successful of the sites proved to be the site with the youngest community coordinator. It seems that it is much more important to hire someone who has genuine empathy for the elderly than to hire on the basis of age. In addition to these findings, the older the community coordinators, the less they understood their roles and function, goals, and purposes of the project, in other words, the technical aspects of the project.

While the older community coordinators had difficulty in implementing the technical aspects of the project, their knowledge of their community enabled them to be easily accepted, whereas the younger ones were initially viewed with suspicion and time had to elapse before they were accepted.

2. Assistance in accessing programs — In half of the project sites, this proved to be a difficult activity to implement and was especially true of the Jicarilla and Papago project sites. This activity included transporting the elderly to service centers and helping the elderly fill out the necessary application forms to become eligible for these services. It is likely that they also did not know how to fill them out as well, and therefore, could not assist the elderly.
3. Training — In retrospect, the training sessions held to train the community coordinators could be the source of most of the difficulties experienced by the coordinators. Their roles and responsibilities were ambiguous and were intentionally designed to be. It was believed that this would allow flexibility on the part of the community coordinators to carve out their roles and re-

sponsibilities. Training could have occurred on-site and thereby introduced them to the relevant service programs and significant actors in the service delivery system to facilitate the "networking" that was necessary for the project.

4. **Measurement** — The selection of this method to measure the project's effectiveness was premature and inappropriate. It was not known at the beginning of the project that basic activities would be time consuming. In fact, the project itself was delayed three months from the beginning due to the feeling of the Executive Director that the Access Project Director should be an Indian. This required re-advertising the position and the subsequent delay of three months. A more appropriate measurement would have been to identify both the Indian elderly receiving and not receiving services, identifying reasons for their status, and approaching the service delivery agency regarding these circumstances. The difficulty in measuring "before" and "after" pictures as presented in this project is to ascertain who were on the program rolls and to delineate those who were "legitimately" not on the rolls. An example of this problem is that an individual who is on the food stamps roll must be re-evaluated for eligibility periodically. Some of the elderly sometimes forgot to go back and re-certify themselves and therefore were cropped from the list. If the elderly were assisted during this period by the coordinator, the validity of calling it a percentage increase becomes somewhat hazy and hence, this measurement is invalid. The strength of the program seems to be in the explanation of programs and the understanding of them as well as of the actual utilization.

SUMMARY

The project's secondary goal was to develop a model that Indian communities can replicate in their communities. The project seems to indicate that it is not necessarily true that elderly workers can help elderly people better than younger people. Younger people can be especially effective if they are dedicated and have the willingness to go to great lengths to help the elderly. The elderly helping elderly would work on a reservation that is basically traditional and has limited contact with the non-Indian community. It is possible to implement both systems by utilizing the young to handle the technical aspects of the outreach pro-

gram while the older workers could be utilized in an effective role as the phalanx of the outreach programs.

In either mode, training is very important. The Access Project experience indicates that a comprehensive and more intensive training session held over 3-4 days, would be more beneficial than a quick 1 or 2 day session. Role playing would be greatly emphasized.

It is also important that the tribal aging program be directly involved in any effort to implement a similar type of outreach program. In some of the sites, the community coordinators began to compete with the aging program resulting in a waste of time and resources over charges of "turfism" and "duplication of effort."

The need to document official agency responses to referrals and inquiries is important. It allows for the accurate tracking of individuals throughout the service delivery maze.

RECOMMENDATIONS

1. There be a coordinated approach to service delivery systems. This can be accomplished by implementing a case management approach through an amendment to Title VI of the Older Americans Act of 1978 that requires the development of this system.
2. That a concept entailing a Service Ombudsman be implemented by each tribe which will assure that elderly Indian persons needing services receive these services.
3. That the various entitlement agencies at the Federal level be encouraged to establish offices on Indian reservations staffed by Indian personnel who are bilingual, whenever appropriate.
4. That the informal caregiver system be strengthened through the subsidization of this system.
5. That priority for entitlement services and subsequent outreach efforts target the elderly Indian widowers and widows.
6. That income derived from trust land be exempt from consideration as assets or income for purposes of establishing eligibility for entitlement programs.
7. That legislation be introduced and passed that would allow Indian tribes as sovereign states to implement Medicaid programs,

which currently are reserved only for the states.

8. That entitlement programs be earmarked for Indian tribes, channelled through a single funding agency and allocated to Tribes on a block grant basis.

SECTION V:
APPENDIX

ATTACHMENT A

RATING SCALE

(Total Possible Points = 100)

1. **GEOGRAPHIC AREA** (0 - 2)
(1 each in Regions VI, VIII, IX, X)

2. **LANGUAGE** (0 - 25 pts.)
% Elderly Speaking English:

- a. 0 - 20% = 25
- b. 21 - 40% = 20
- c. 41 - 60% = 15
- d. 61 - 80% = 10
- e. 81 - 100% = 5

3. **ISOLATION** (0 - 40 pts.) (Total A + B)

A. Density Factor = Total Population ÷ Total Acres _____

- a. 0.0 - 1.0 = 20 .0001 to .0200 20
- b. 1.0 - 2.0 = 16 .0201 to .0400 16
- c. 2.1 - 4.0 = 12 .0401 to .0600 12
- d. 4.1 - 7.0 = 8 .0601 to .0800 8
- e. 7.1 - 11.0 = 4 .0801 to .1000 4
- f. 12.0 - up = 0 .1001 and over 0

B. Service Points (from center of reservation to Service Location) _____

- a. SSA..... 10 mi.____ 20 mi.____ 30 mi.____ 40 mi.____ 50 mi.____
- b. VA 10 mi.____ 20 mi.____ 30 mi.____ 40 mi.____ 50 mi.____
- c. BIA 10 mi.____ 20 mi.____ 30 mi.____ 40 mi.____ 50 mi.____
- d. Food Stamps 10 mi.____ 20 mi.____ 30 mi.____ 40 mi.____ 50 mi.____

4. **60+ POPULATION** (0 - 10 pts.)

- a. 50 - 150 = 2
- b. 151 - 250 = 4
- c. 251 - 350 = 6
- d. 351 - 450 = 8
- e. 451 + = 10

5. EXPRESSION OF TRIBAL INTEREST (0 - 9 pts.)

- a. Letter from Program Director of Department Head
- b. Letter from Tribal Chairman
- c. Letter or resolution from Tribal Council
- d. Letter & commitment of resources

6. OTHER CONSIDERATIONS (0 - 14 pts.; A + B + C + D)

- a. Unemployment (25% & over) = 1 ————— $\left[\begin{array}{l} 0 - 25 = 1 \\ 26 - 50 = 2 \\ 51 - 75 = 3 \\ 76 - 100 = 4 \end{array} \right.$
- b. Existence of Aging Programs = 2
- c. 55 - 59 Age Population:
 - a. 10% or less of 60+ Age Population = 1
 - b. 11 - 20% of 60+ Population = 2
 - c. 21 - 30% of 60+ Population = 3
 - d. 31 - 40% of 60+ Population = 4
 - e. 41 - plus of 60+ Population = 5
- d. Tribal Prosperity (Subjective)
 - a. Poor = 6
 - b. Affluent = 0

ATTACHMENT B

CONTRACT AGREEMENT

The National Indian Council on Aging, Inc., hereinafter referred to as the Agency, and _____ hereinafter referred to as the Consultant, agree as follows:

1. **Employment.** The Agency hereby employs the Consultant and the Consultant hereby accepts employment upon the terms and conditions hereinafter set forth.

2. **Term.** Subject to the provisions for termination as hereinafter provided, the term of this agreement shall begin on _____ and shall terminate on October 31, 1980. This agreement may be extended for a period from the date of termination, and for a unlimited number of successive one-year periods thereafter unless either party has given written notice of its intent not to renew the agreement at least thirty (30) days prior to the end of any contract.

3. **Compensation.** For all services rendered by the Consultant under this agreement, the Agency shall pay the Consultant \$800 per month, payable the 15th and 30th of each month, throughout the contract year.

4. **Duties.** The Consultant is engaged as the Community Coordinator for the Access Project of the National Indian Council on Aging. He/She agrees to perform to the best of his/her ability and in a reasonable and prudent description may be extended or curtailed from time to time by the Agency to conform to changes in the business and/or activities of the Agency but nothing in this agreement shall be construed as requiring the Agency to increase the Consultant's compensation based on a change in the Consultant's job description. The Consultant acknowledges and agrees to abide by the duly established stated policies of the Community Coordinator job description and procedures of the Agency wherever applicable.

5. **Extent of Services.** The Consultant shall devote his entire business time, attention and energies to the business of the Agency and shall not during the term of this agreement be engaged in any other business activity whether or not such business activity is pursued for gain, profit, or other pecuniary advantage; but this shall not be construed as prevent-

ing the Consultant from investing his personal assets in such form or manner as will not require any services on the part of the Consultant in the operation of the affairs of the companies in which such investments are made.

6. Working facilities. The Consultant will negotiate with tribal agency for use of an office, and such other facilities and services, suitable to this position and adequate for the performance of his duties. Agreements requiring payment by the contractor to the tribal agency require approval of the contractor.

7. Expenses. The Consultant is authorized to incur expenses which are reasonable for promoting the business or activity of the Agency and which are in conformity with applicable federal regulations for the terms of any applicable grant or contract. The Agency will reimburse the Consultant for all such expenses upon the presentation by the Consultant from time to time, of an itemized account of such expenditures, together with adequate supporting documentation.

8. Property Rights. All reports, materials, and other documents become the property of the Agency. Information developed from this project shall be disseminated by the Agency **only**.

9. Notices. Any notice required or permitted to be given under this agreement shall be sufficient if in writing, and if sent by registered mail to his residence in the case of the Consultant or to its principal office in the case of the Agency.

10. Waiver of breach. The waiver by the Agency of a breach of any provision of this agreement by the Consultant shall not operate or be construed as a waiver of any subsequent breach by the Consultant.

11. Assignment. The rights and obligations of the Agency under this agreement shall inure to the benefit of and shall be binding upon the successors and assigns of the Agency. The Consultant may not assign to other person any duty or obligation owed by him to the Agency under the terms of this agreement.

12. Consultants will receive reimbursement for mileage in fulfilling their job description at a rate of 18.5 cents per mile. This will be incorporated on their expense accounts.

13. Entire agreement. This instrument contains the entire agreement of the parties. It may not be changed orally but only by an agreement in writing signed by the party against whom enforcement of any waiver, change, modification, or extension, or discharge is sought.

In witness whereof, the parties have executed this agreement.

NATIONAL INDIAN COUNCIL ON AGING

Dated: _____ By: _____
Alfred G. Elgin, Executive Director

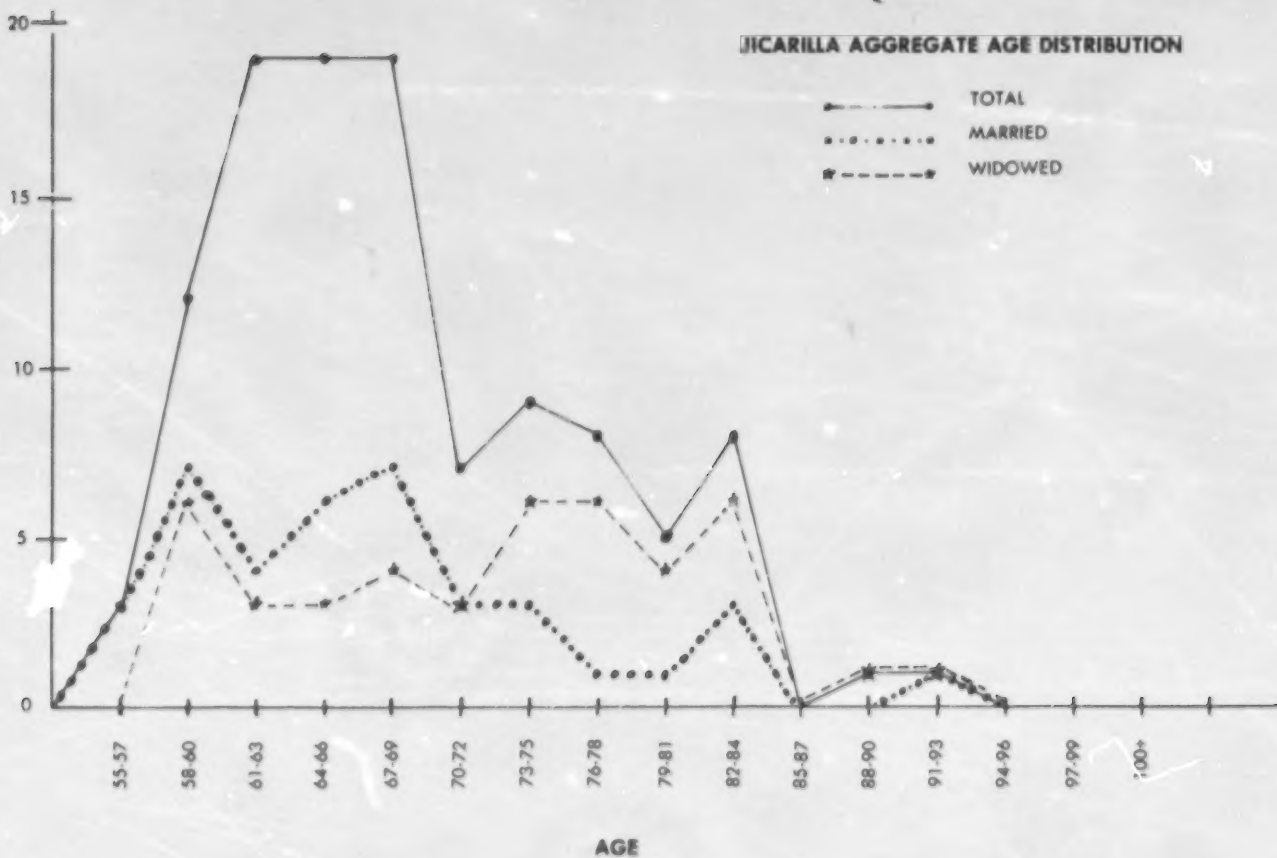
Dated: _____
Robert L. Canard, Project Director

Dated: _____
Consultant

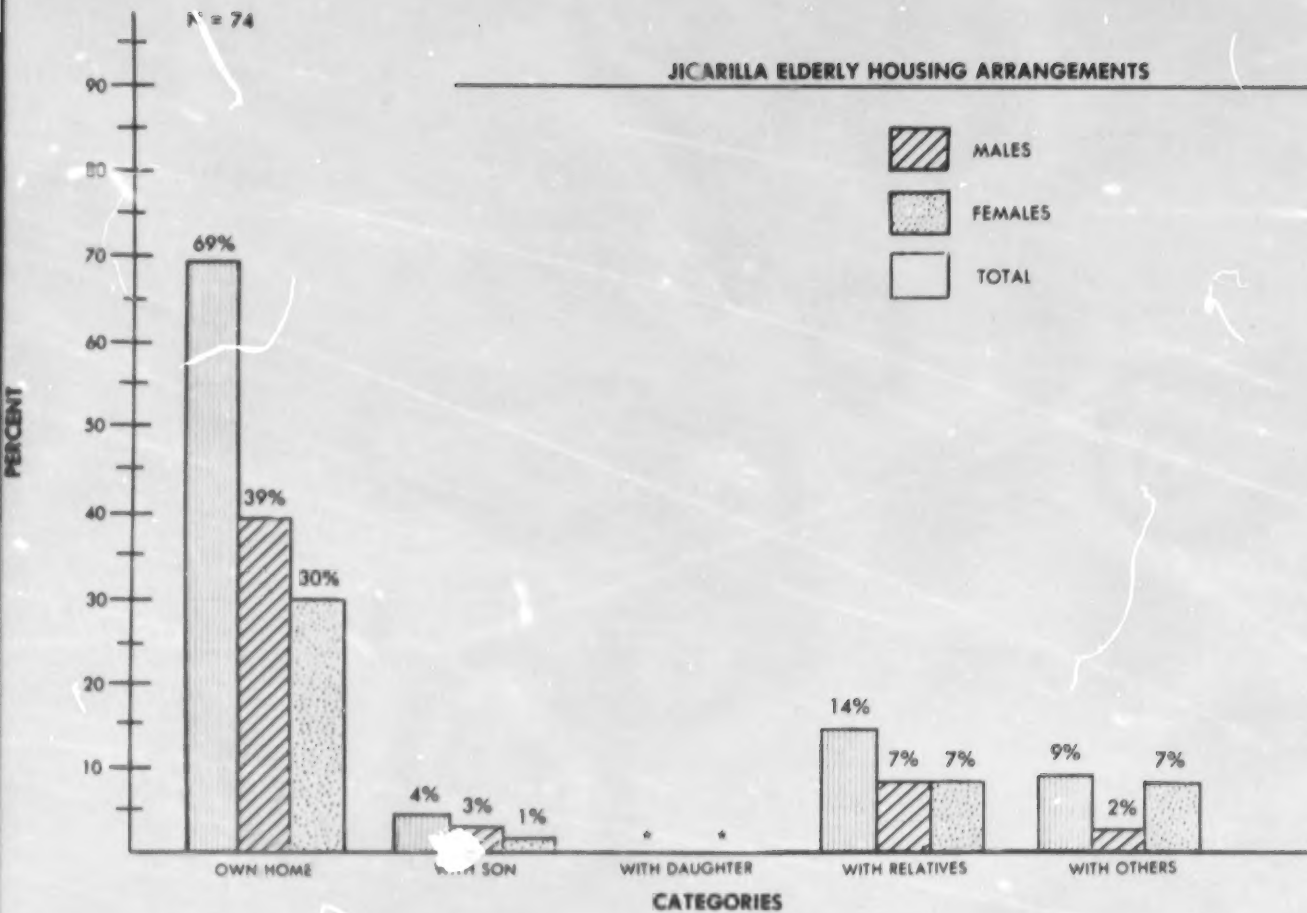
Attest: _____
Larry Curley, Director of T&TA

Dated: _____

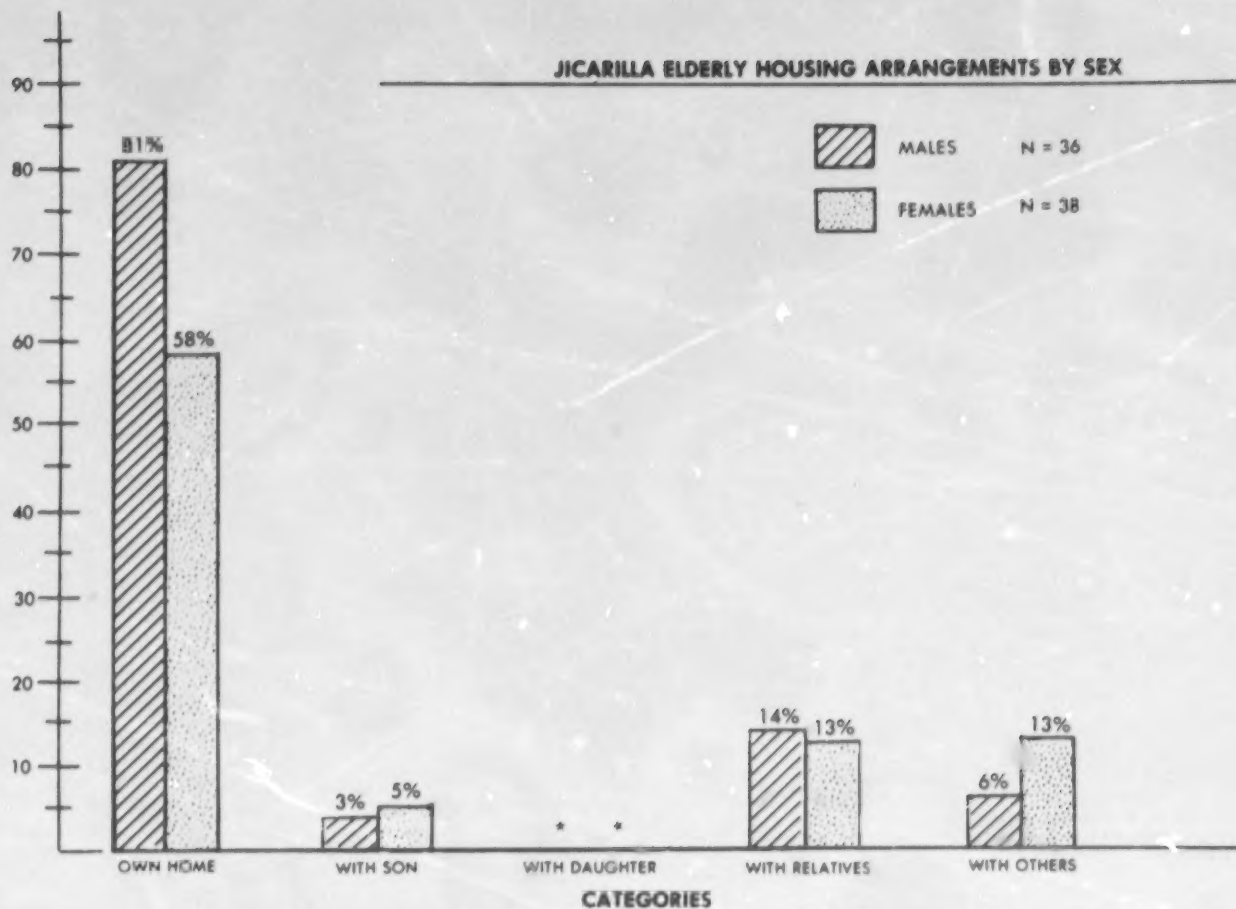
JICARILLA AGGREGATE AGE DISTRIBUTION



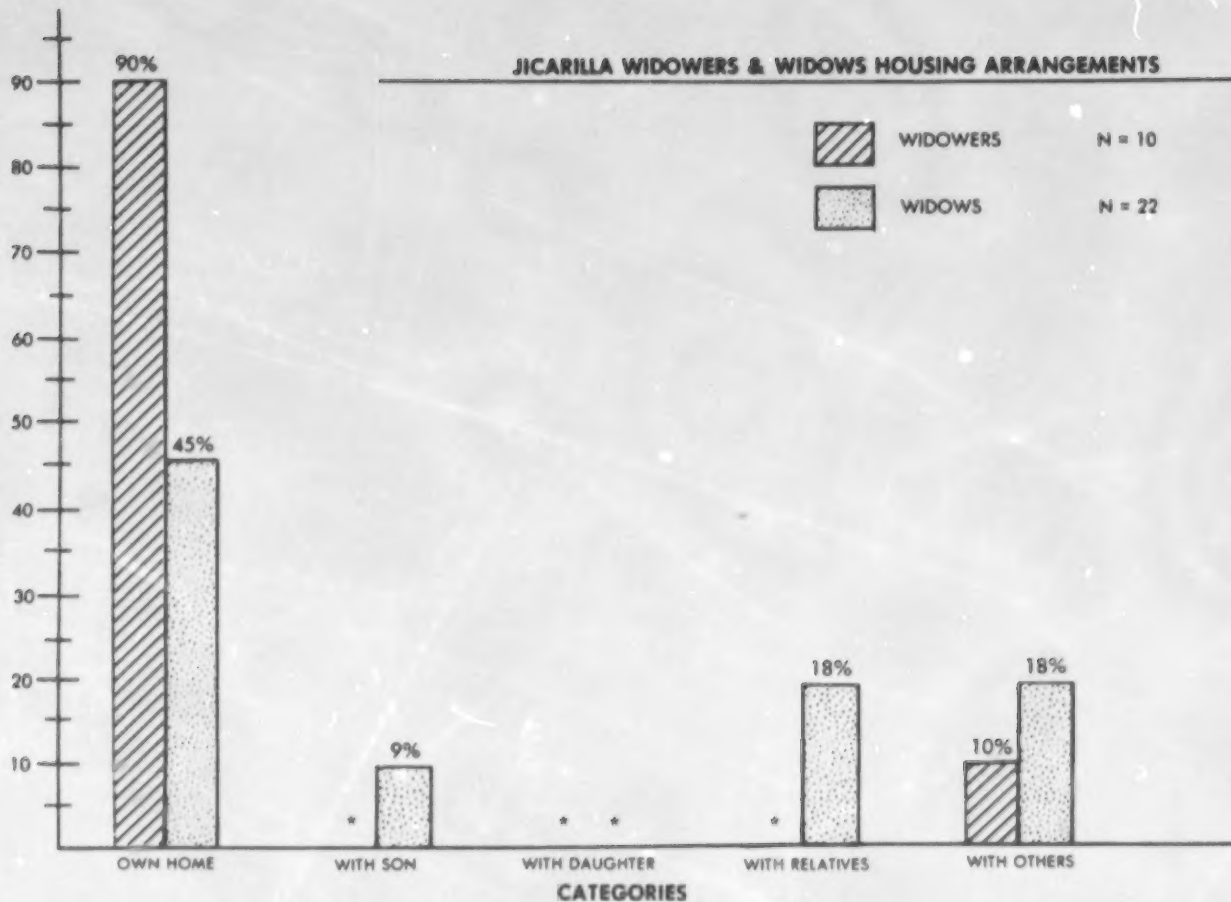
JICARILLA ELDERLY HOUSING ARRANGEMENTS

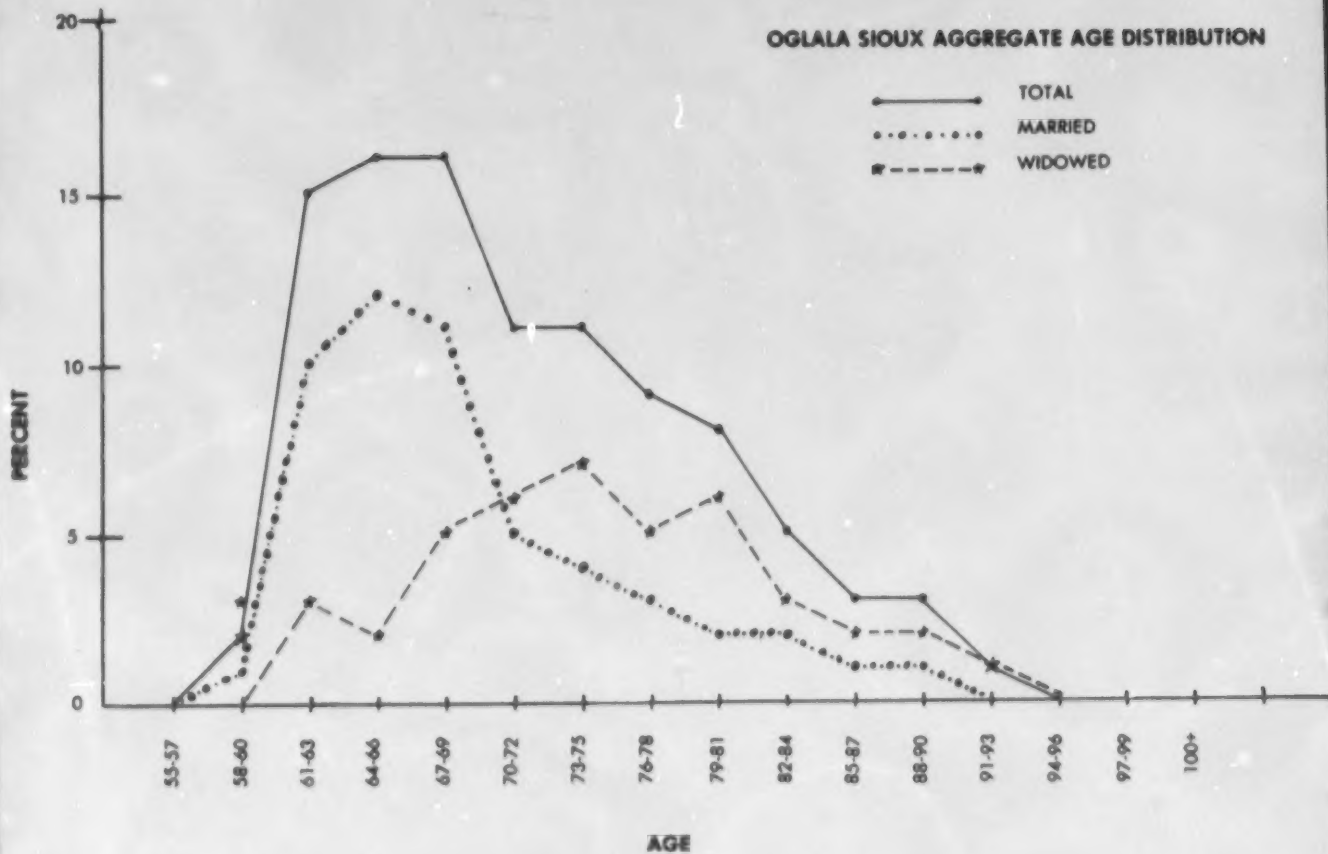


JICARILLA ELDERLY HOUSING ARRANGEMENTS BY SEX



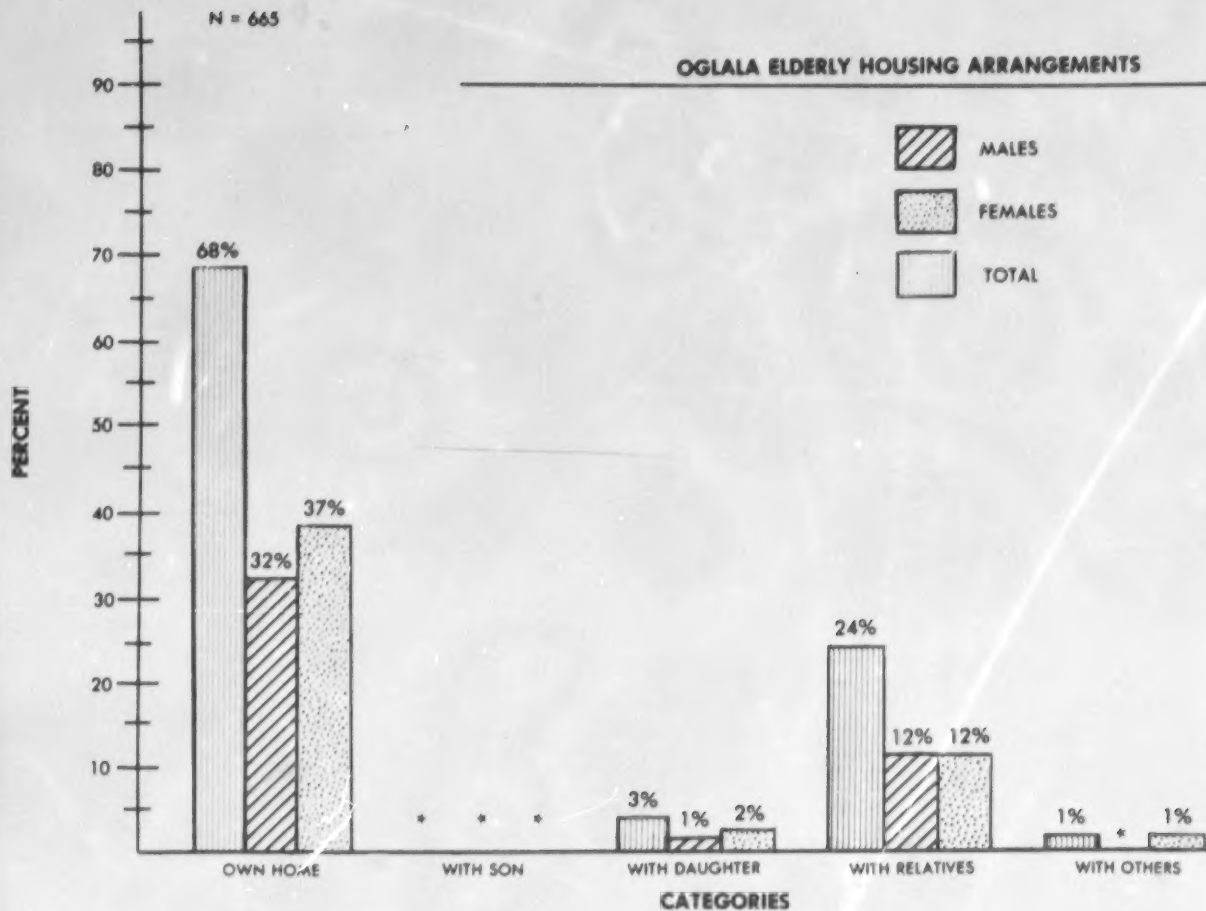
JICARILLA WIDOWERS & WIDOWS HOUSING ARRANGEMENTS



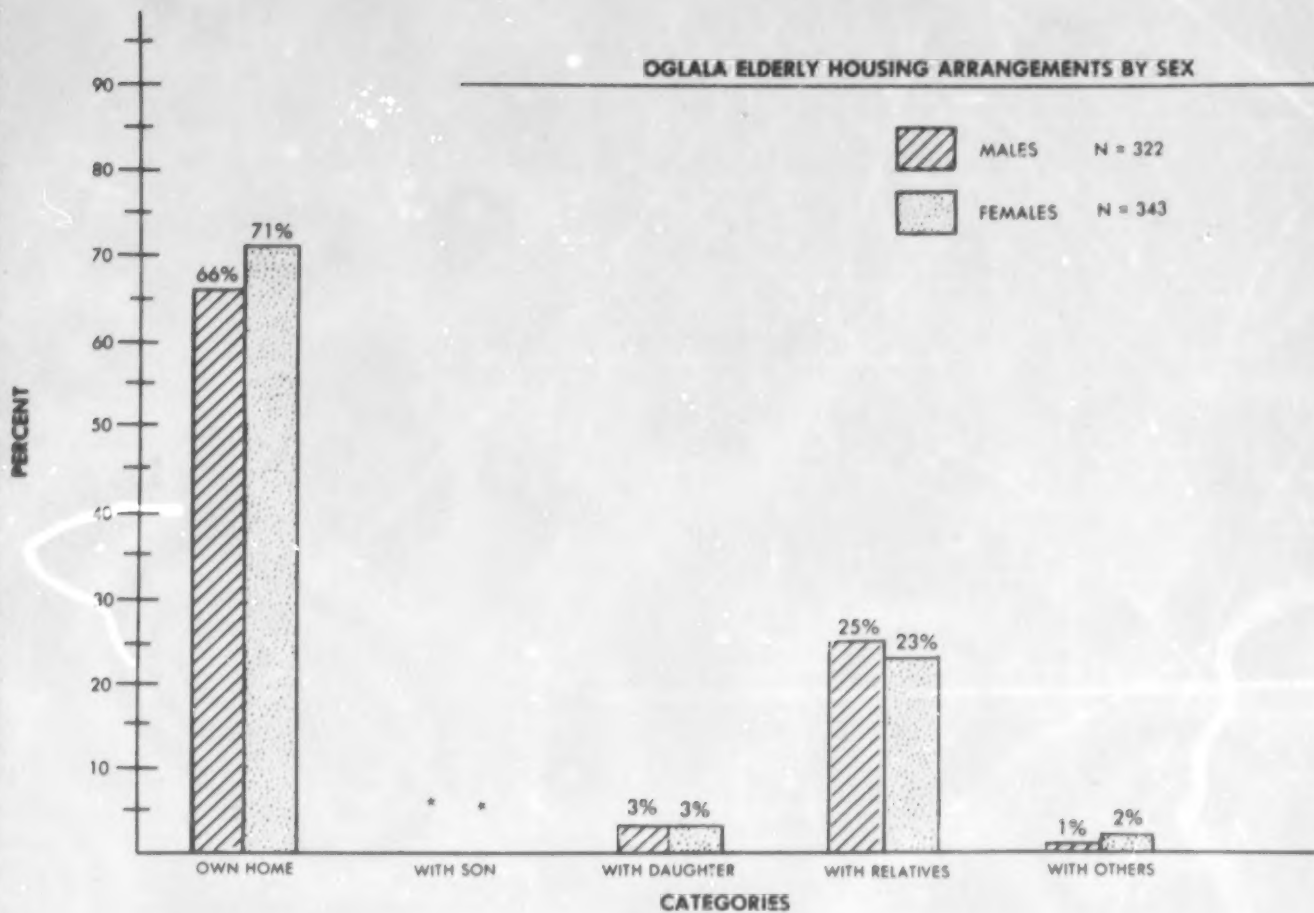


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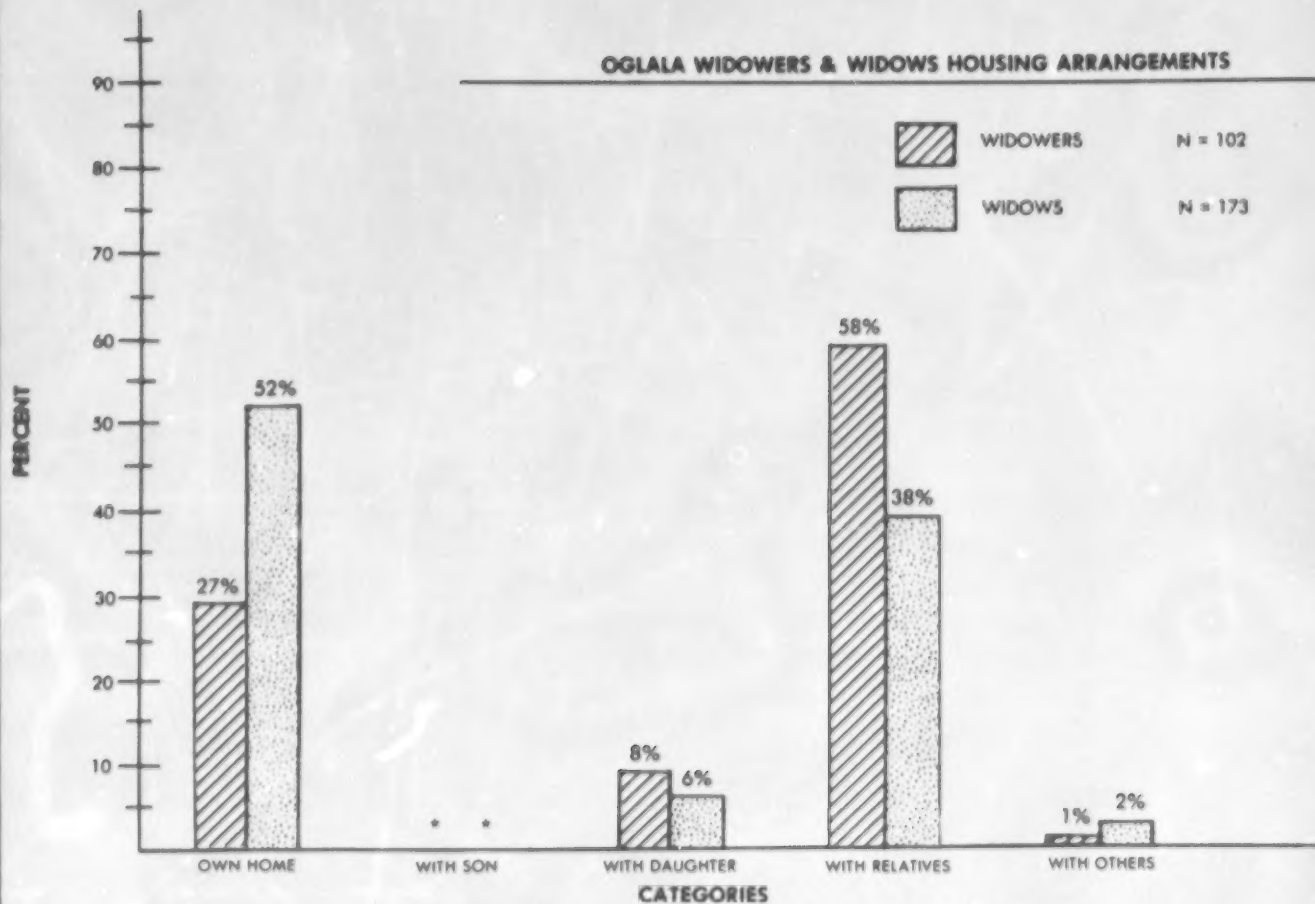
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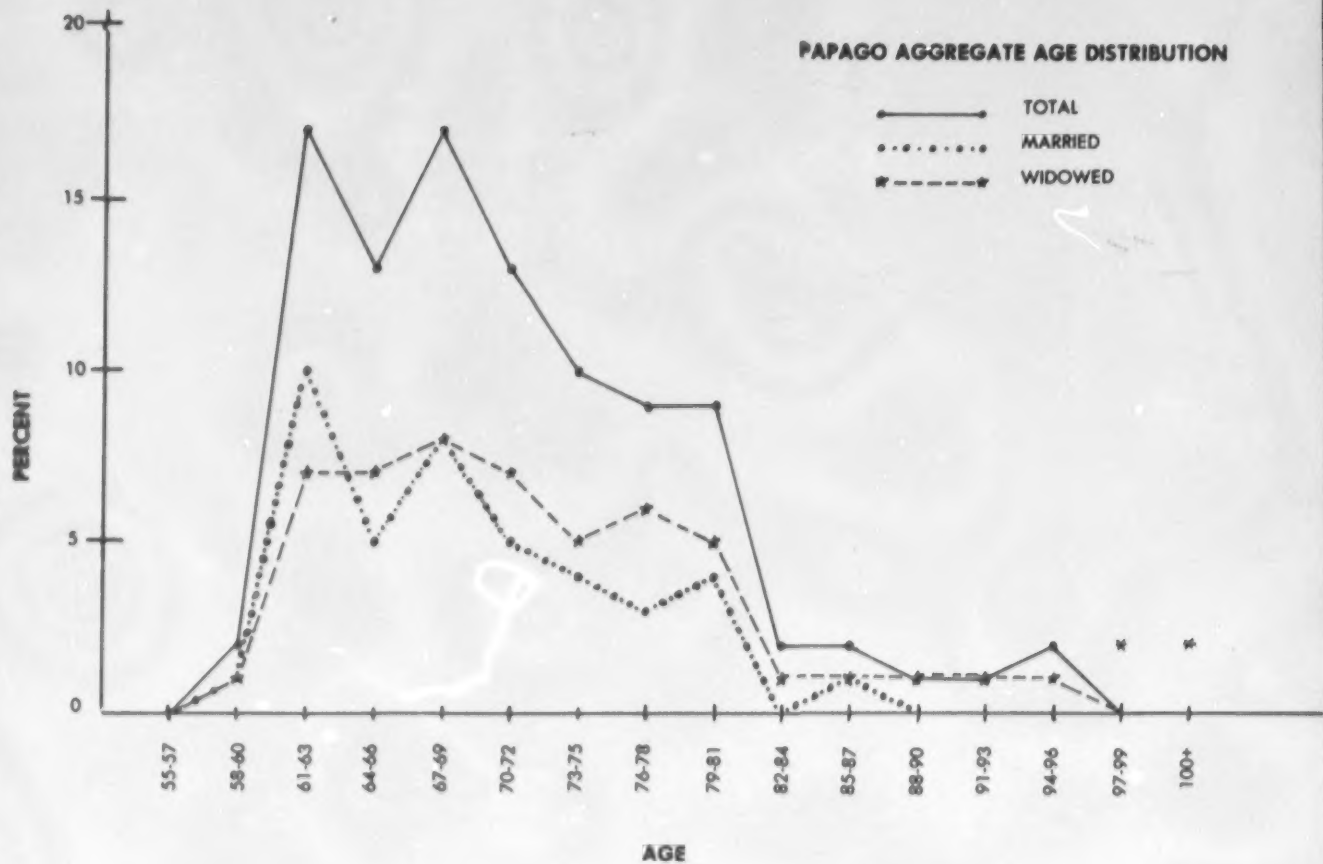


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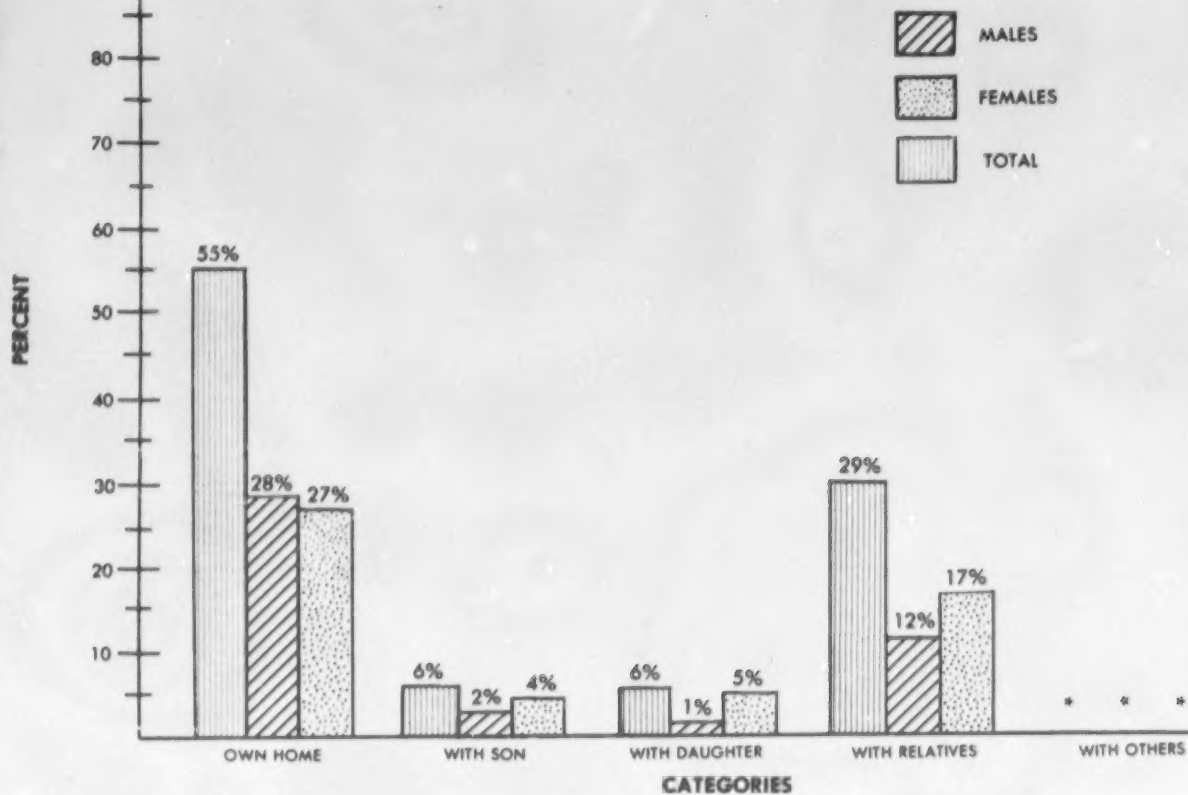
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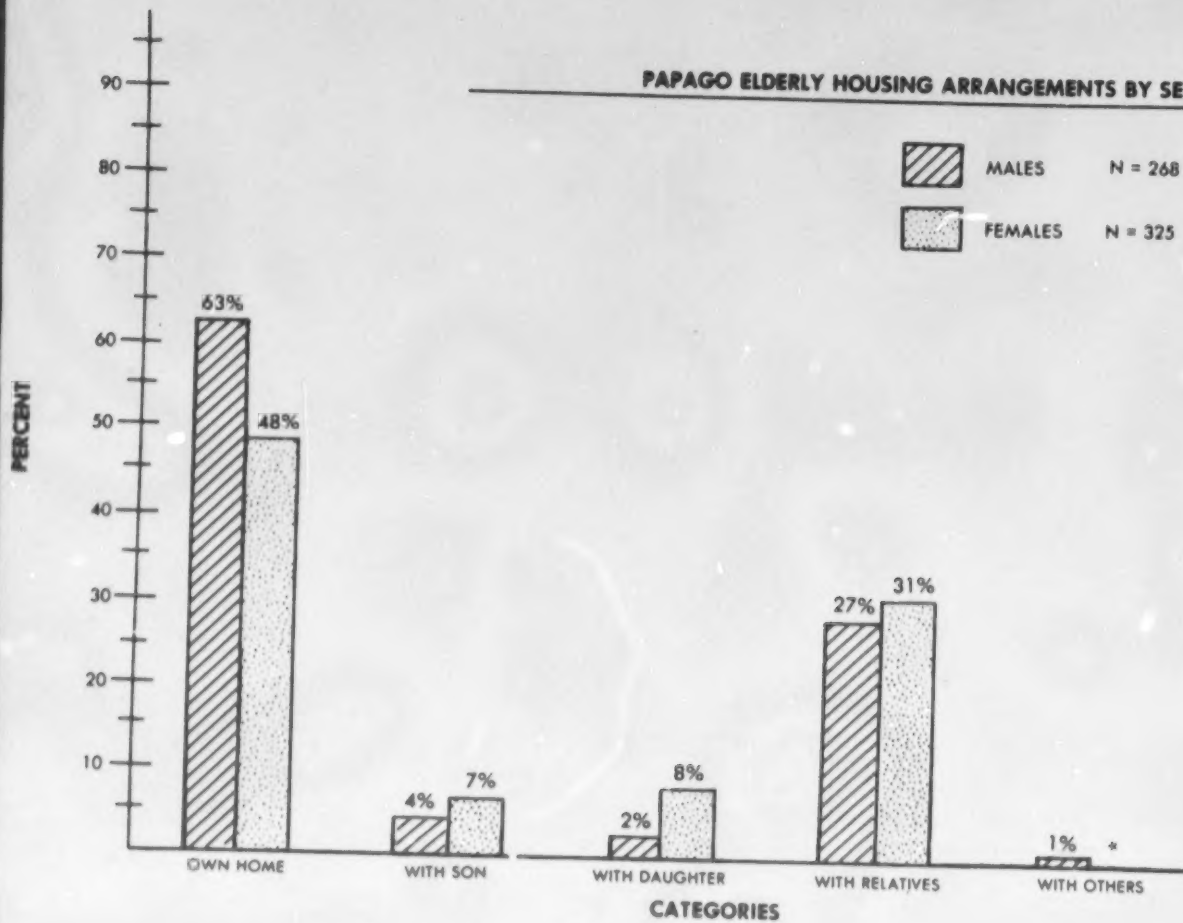


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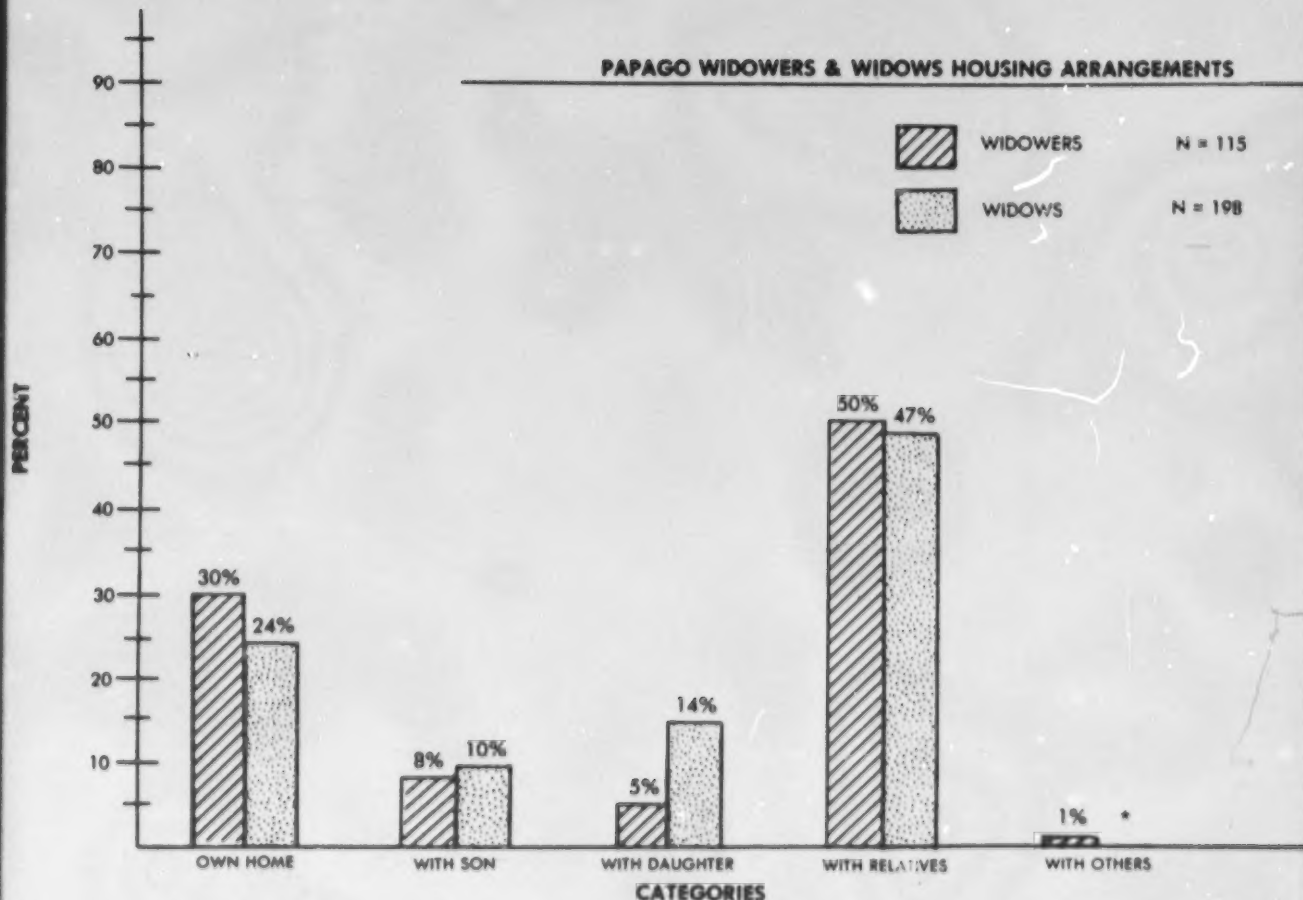
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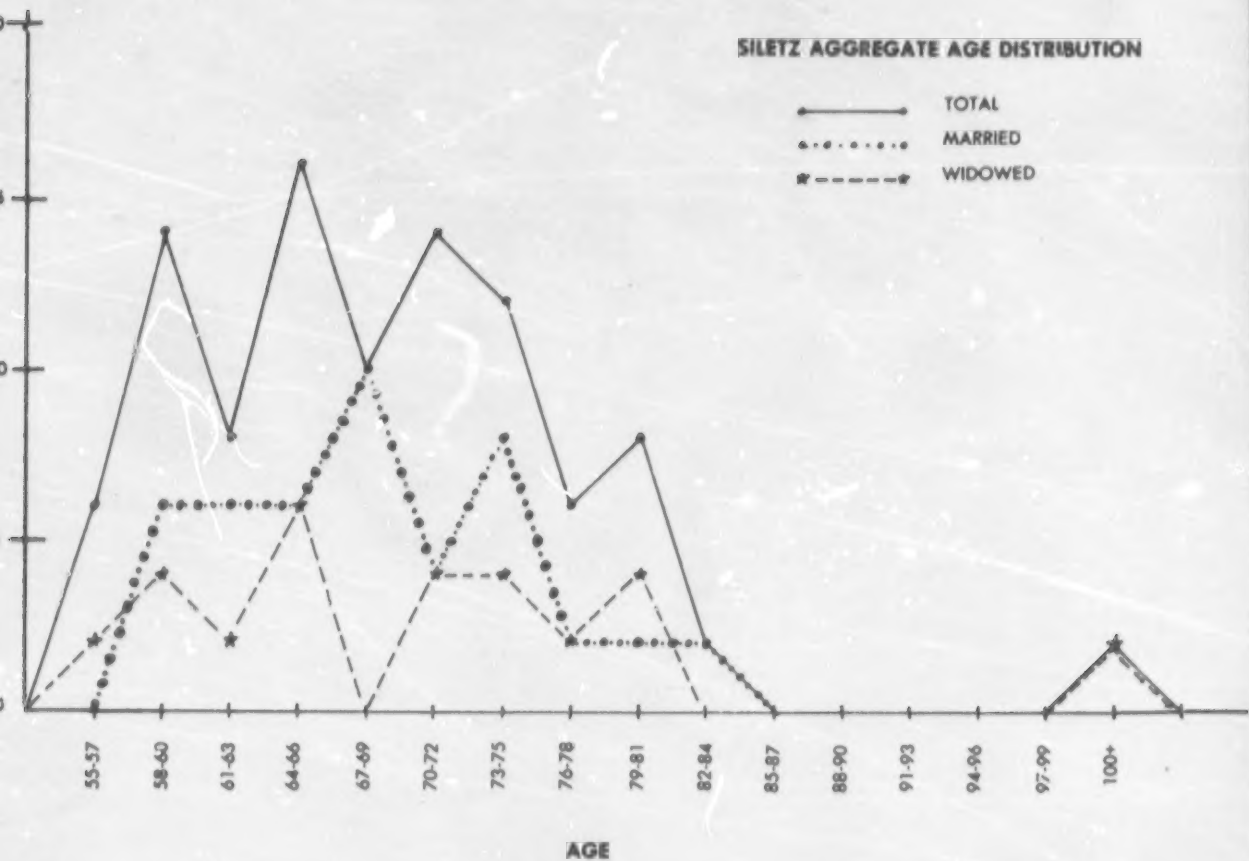
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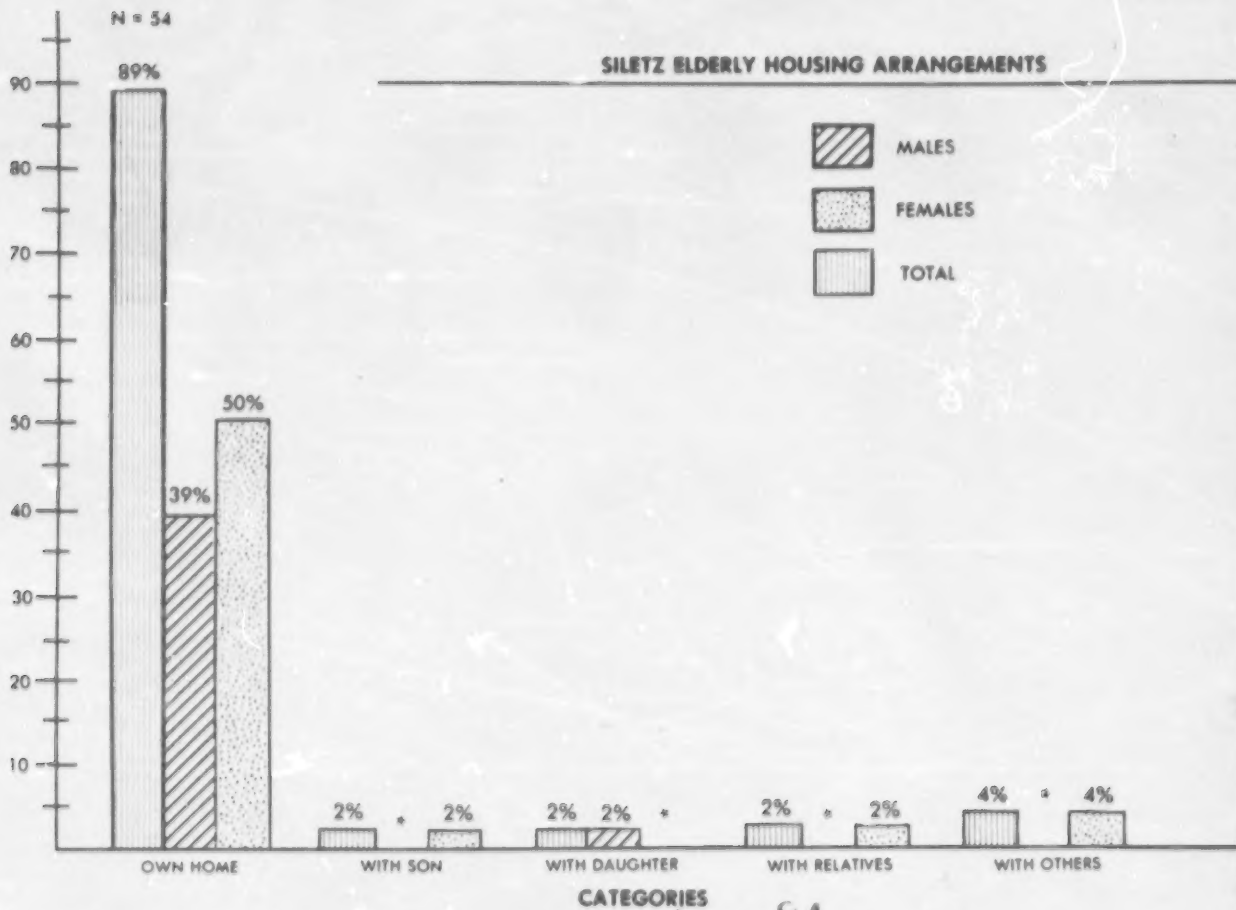
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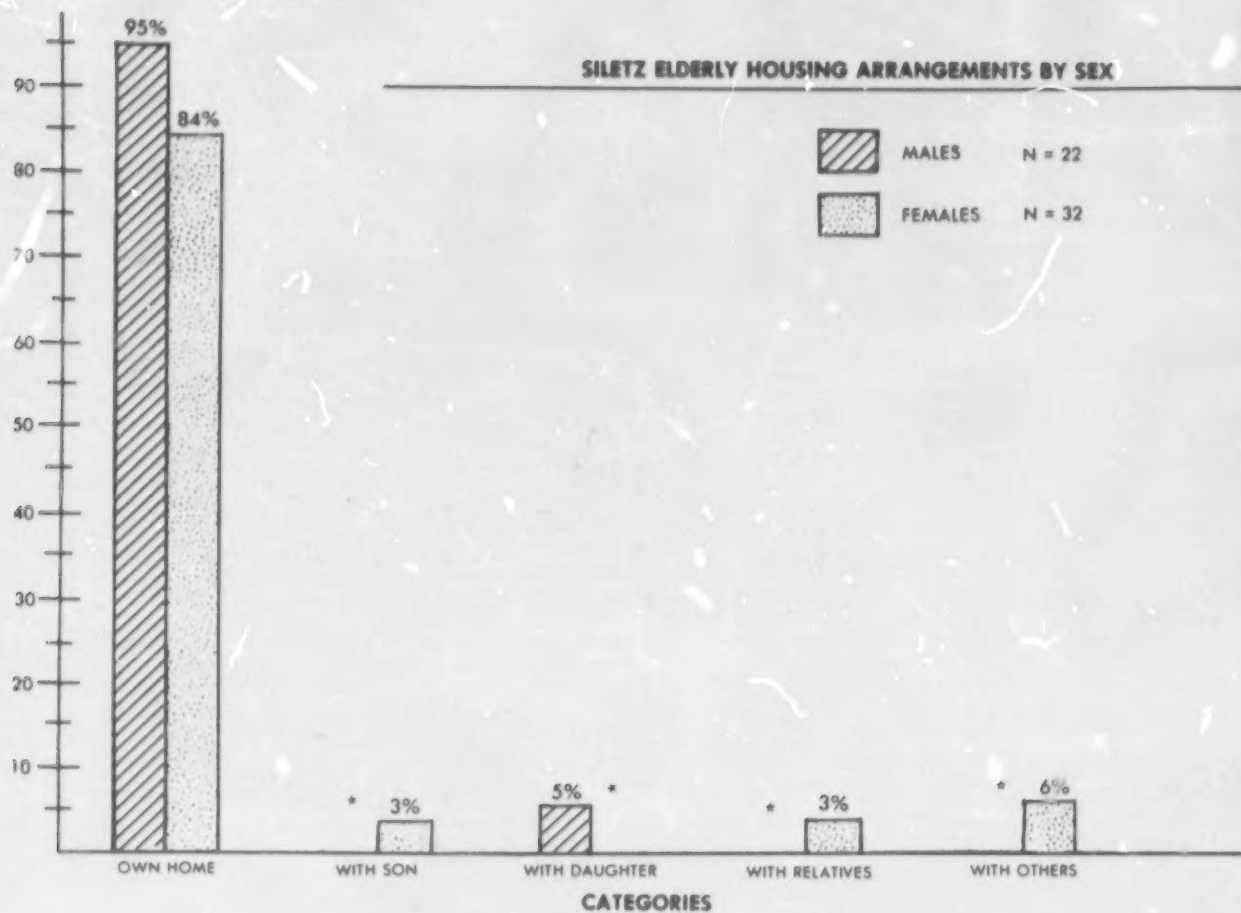


SILETZ AGGREGATE AGE DISTRIBUTION

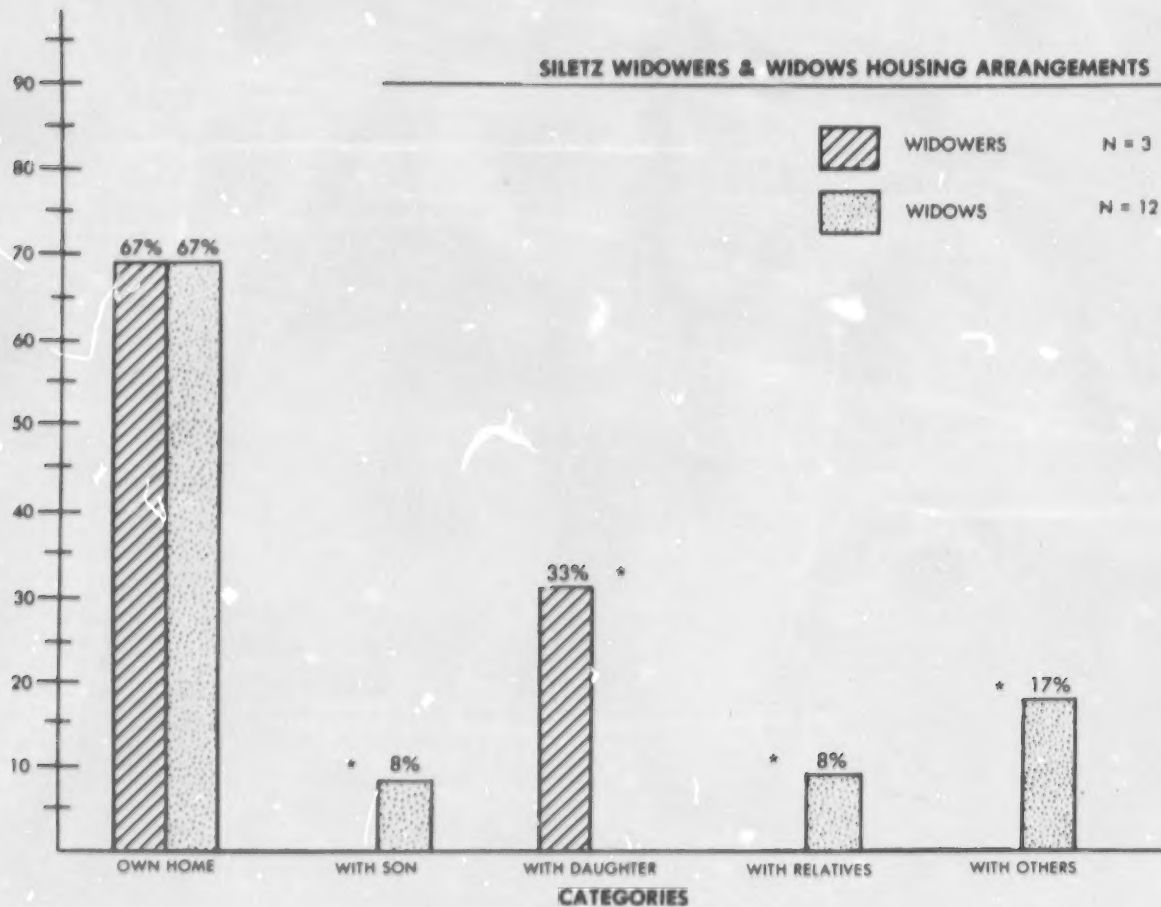


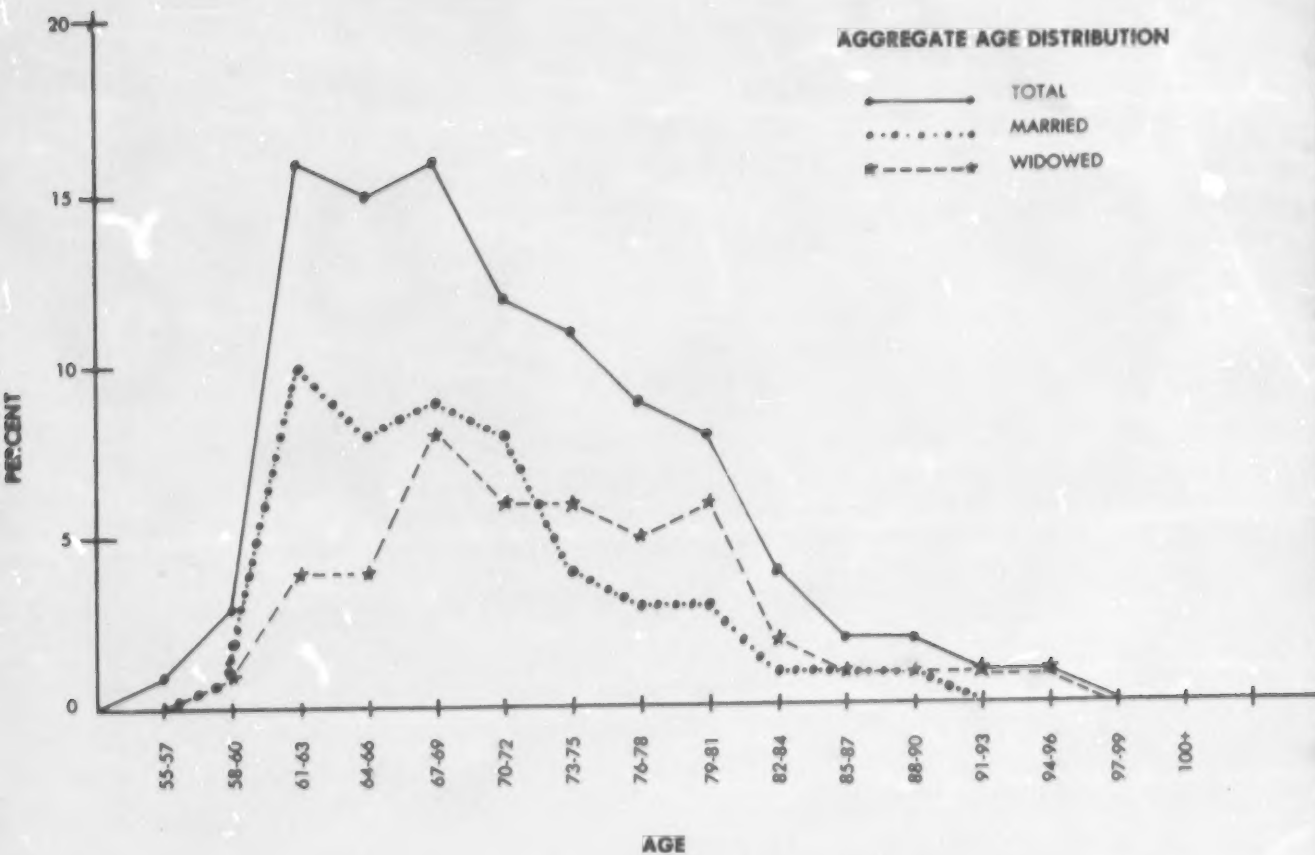
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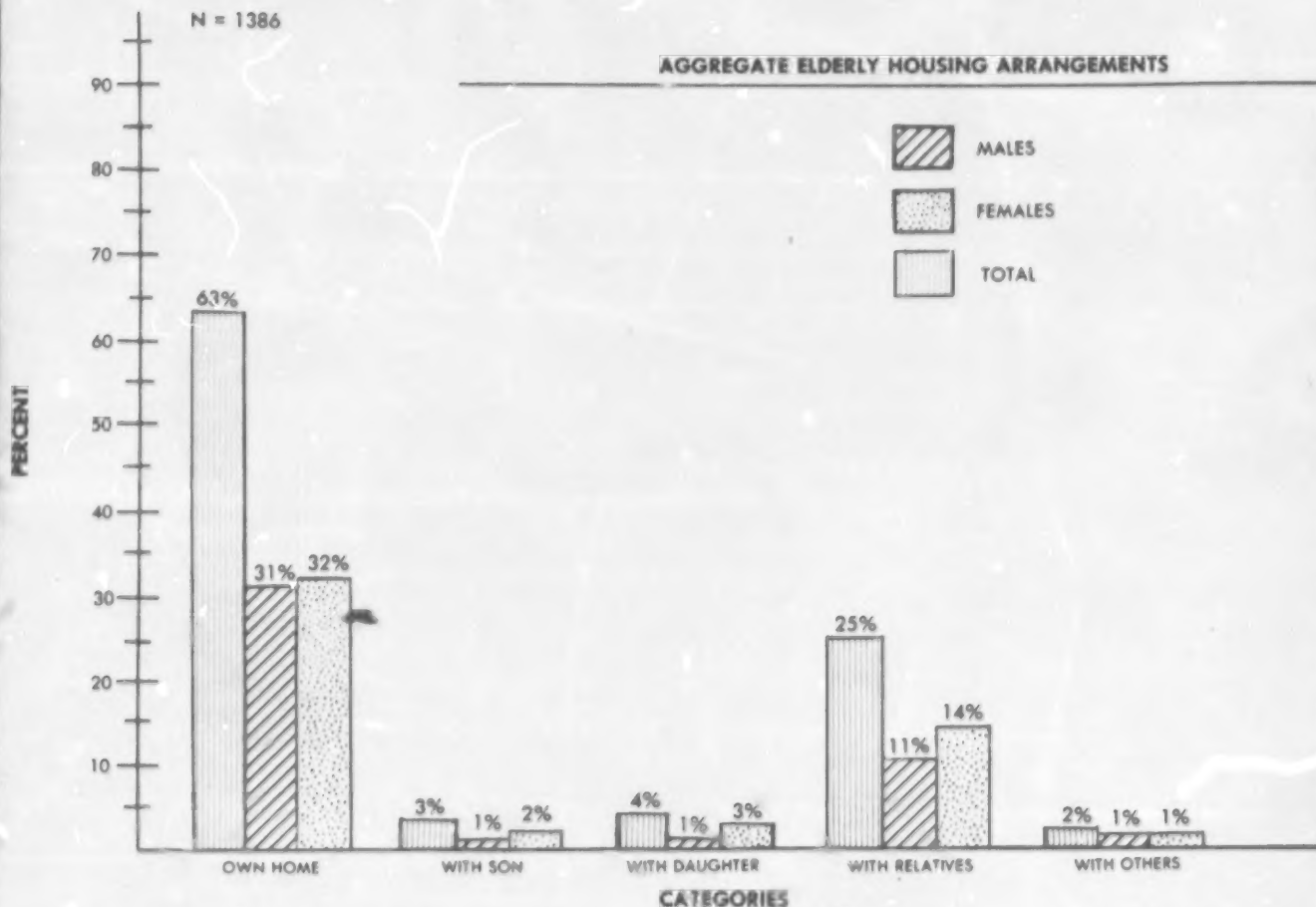
SILETZ WIDOWERS & WIDOWS HOUSING ARRANGEMENTS





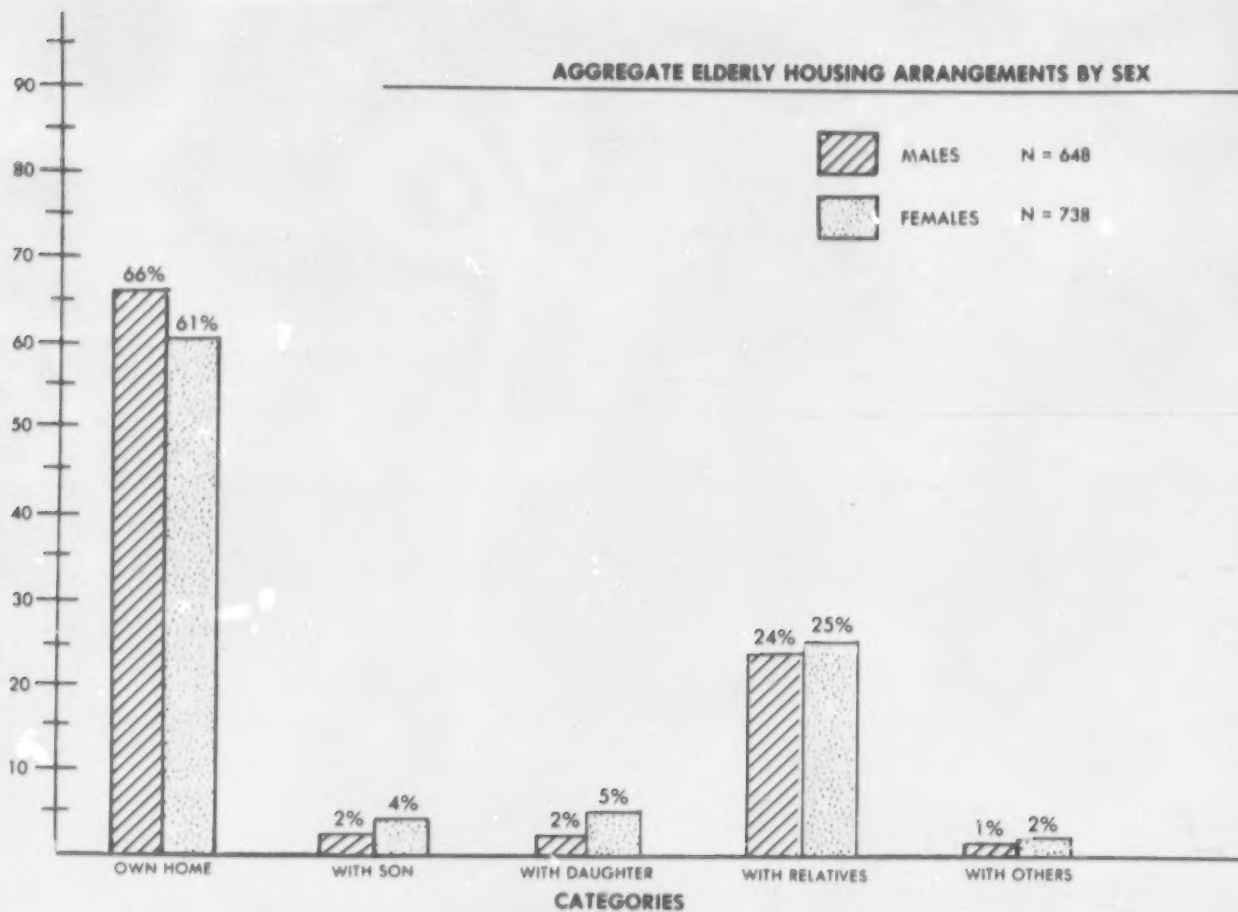
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AGGREGATE ELDERLY HOUSING ARRANGEMENTS

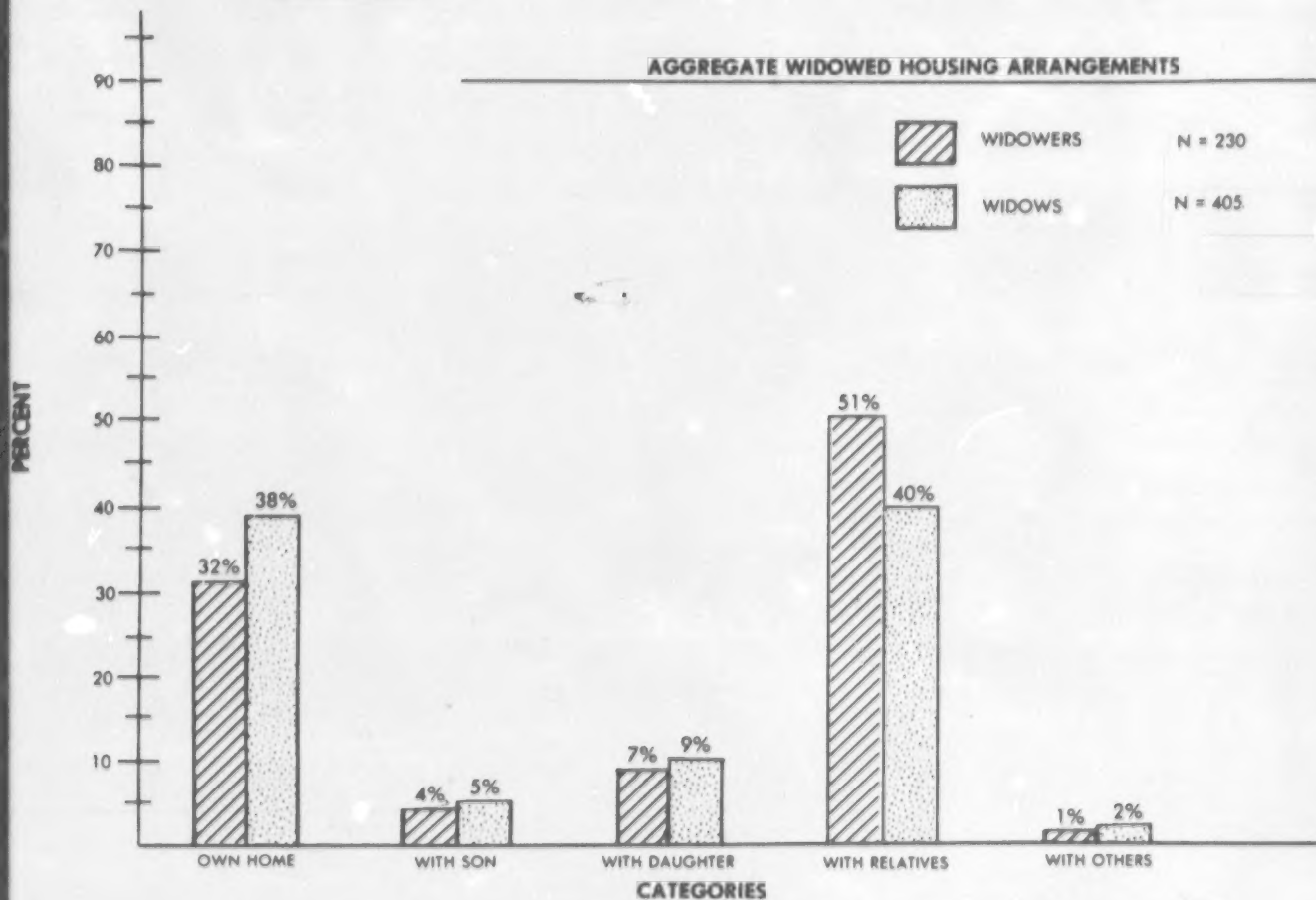


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AGGREGATE ELDERLY HOUSING ARRANGEMENTS BY SEX



AGGREGATE WIDOWED HOUSING ARRANGEMENTS



PROGRAM PARTICIPATION: BY TRIBE AND AGGREGATE

DEPARTMENTS & PROGRAMS	JICARILLA	PINE RIDGE	PAPAGO	SILETZ	TOTAL
SOCIAL SECURITY:					
DISABILITY	0	12%	5%	22%	9%
RETIREMENT	8%	46%	30%	41%	37%
72+ BENEFITS	1%	1%	2%	7%	2%
SURVIVORS	5%	2	3%	6%	12%
S.S.I.	42%	4	47%	7%	45%
SOCIAL SECURITY:					
MEDICAID	7%	77%	1%	6%	39%
MEDICARE	23%	66%	38%	59%	51%
VETERANS ADMINISTRATION:					
PENSIONS	0	1%	2%	13%	2%
SURVIVORS	5%	1%	3%	4%	2%
U.S. DEPT. OF AGRICULTURE:					
COMMODITIES	0	10%	56%	13%	29%
FOOD STAMPS	1%	83%	17%	11%	49%
BUREAU OF INDIAN AFFAIRS:					
GENERAL ASSISTANCE	32%	5%	7%	11%	8%
TRIBAL DIVIDENDS:	86%	0	0	0	5%

WIDOWED PROGRAM PARTICIPATION: BY TRIBE AND AGGREGATE

DEPARTMENTS & PROGRAMS	JICARILLA		PINE RIDGE		PAPAGO		SILETZ		TOTAL		
	M	F	M	F	M	F	M	F	M	F	TOTAL
Social Security:											
DISABILITY	0	0	20%	9%	8%	1%	67%	33%	13%	5%	8%
RETIREMENT	10%	9%	64%	10%	32%	27%	100%	42%	46%	19%	29%
72+ BENEFITS	0	0	1%	3%	4%	3%	0	17%	3%	3%	3%
SURVIVORS	10%	5%	4%	78%	0	7%	0	17%	2%	38%	25%
S.S.I.	50%	36%	77%	62%	45%	50%	0	0	59%	53%	55%
Social Security:											
MEDICAID	0	5%	92%	88%	1%	0	0	25%	41%	39%	39%
MEDICARE	30%	14%	84%	84%	43%	40%	100%	58%	61%	58%	59%
Veterans Administration:											
PENSIONS	0	0	1%	0	1%	0	0	0	1%	0	*
SURVIVORS	0	14%	0	2%	3%	6%	0	0	1%	4%	3%
U.S. Dept. of Agriculture:											
COMMODITIES	0	0	10%	10%	67%	49%	33%	8%	38%	28%	32%
FOOD STAMPS	0	0	86%	87%	4%	21%	0	17%	40%	48%	45%
Bureau of Indian Affairs:											
GENERAL ASSISTANCE	50%	23%	3%	1%	4%	6%	33%	0	6%	4%	5%
Tribal Dividends:	90%	73%	0	0	0	0	0	0	4%	4%	4%